



Gorman Joint School District

49847 Gorman School Road
P.O. Box 104
Gorman, CA 93243
(661) 248-6441 – FAX (661) 248-0604

BOARD OF TRUSTEES

NOTICE OF REGULAR MEETING

AGENDA

February 11, 2020

Gorman School

Closed Session: 3:00 P.M.

Regular Session: 3:30 P.M.

I. CALL TO ORDER

Salute the flag

Roll Call – Members:

Patricia Edwards, President

Steve Sonder, Clerk

Julie Ralphs, Member

Roll Call – Administration:

Johannis Andrews, Superintendent/Principal

Jean Cummings, Business Manager/Consultant

Denise Saenz, Accounting/Data Processing Technician

ITEMS FROM THE FLOOR

Please submit a "Request to Speak to the Board of Trustees" for agenda and non-agenda items to the Secretary of the Board prior to the meeting. Not more than three (3) minutes are to be allotted to any one (1) speaker, no more than twenty (20) minutes on the same subject. This portion of the agenda is for presentations to the Board and not a question and answer period where the Board enters into dialogue. If you have questions for the Board, please provide the Board President with a copy and an administrator will provide answers at a later date.

II. AGENDA

1. Approve the Agenda as presented for February 11, 2020.

Moved by _____ Seconded by _____

Vote: yes ___ no ___

III. ADJOURN TO CLOSED SESSION

Adjourn to Closed Session at _____ P.M. to discuss personnel, employer/employee relations. (Govt. Code 54957, 54957.6):

1. Personnel (Govt. Code 54957)
2. Employer/Employee Relations (Govt. code 54957.7)
3. Public Employee Discipline/Dismissal/Release/Appointment (Govt. Code 54957)

Moved by _____ Seconded by _____

Vote: yes ___ no ___

IV. RECONVENED TO REGULAR SESSION

Reconvened to Regular Session at _____ P.M.

Moved by _____ Seconded by _____

Vote: yes ___ no ___

ACTION FROM CLOSED SESSION (IF ANY)

V. PRESENTATIONS/INFORMATION/DISCUSSION

A. Presentation

B. Information

1. Superintendent/Principal's Report
2. Trial Balance by Fund Report Period 7
3. Gorman Elementary Paw Print Newsletter dated February 2020
4. Kaiser Permanente March 1, 2020 Renewal Information

C. Comments

1. Board
2. Staff
3. Public-Items from the floor.

D. Discussion

VI. ACTION ITEMS

A. Administrative and Business Office Items:

1. Approve the Minutes of the Regular Meeting of January 22, 2019.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

2. Approve Purchase Orders #19-20-187 through 19-20-222 of which \$26,589.27 was paid from the General Fund and \$33,610.59 from other funds.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

3. Approve the Commercial Warrant Register in the amount of \$98,700.87 from Fund 01.0, \$3,846.11 from Fund 13.0, \$1,976.58 from Fund 14.0, \$33,610.59 from Fund 30.0 and \$700.00 from Fund 76.0.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

4. Approve the 2020 contract renewal for the Gorman Elementary School District with Kaiser Permanente effective 3/1/20-2/29/21.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

5. Approve i-SAFE Direct and DC4 School District Renewal for 1 year in the amount of \$390.00.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

6. Approve IXL Learning Site License (K-8: 75 students) for 1 year March 19, 2020-March 19, 2021 in the amount of \$938.00.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

7. Approval of _____, _____, _____ and _____ for the 2020 CSBA Delegate Assembly Election, Region 22 (Los Angeles County).

Julie Bookman (Eastside USD)
Steven DeMarzio (Westside Union ESD)
Stacy Dobbs (Castaic Union SD)
Keith Giles (Lancaster ESD)

Moved by _____ Seconded by _____ Vote: yes ___ no ___

8. Approve the Gorman Elementary School-School Accountability Report Card (SARC) Reported Using Data from the 2018-19 School Year published during 2019-20 as presented for posting on the school website as required by law.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

9. Approve the Declaration of Need for Fully Qualified Educators for 2019-20.

Declaration that there is an insufficient number of certificated persons who meet the district's specified employment criteria for the position of Certificated Teacher in 2019-20.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

10. Approve local AV ACSA dues for the 2019-20 school year in the amount of \$25.00.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

11. Approve District Basic Membership Dues with the Small School Districts' Association (SSDA) from 2/1/19-1/31/20 in the amount of \$350.00.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

12. Approve quote from Facundo Landscaping for trimming of trees away from classrooms and power lines and removal of pine tree in front of school.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

13. Approve Agreement for Professional Services between Gorman Joint School District and Casey Stanford for Tech Services for the 2019-20 school year, at an hourly rate of \$50.00, up to a maximum of \$2,000.00.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

B. Personnel:

13. Approve Personnel Report #07-19-20.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

14. Approve Conference Report #06-19-20.

Moved by _____ Seconded by _____ Vote: yes ___ no ___

15. Approve Resolution #11-19-20 Board Absence of Julie Ralphs on January 14, 2020.

Moved by _____ Seconded by _____

Vote: yes ___ no ___

C. Board Policy

VII. ADVANCE PLANNING

The next regular meeting of the Board of Trustees will be held Tuesday, March 10, 2020 at 3:00 P.M. closed session and 3:30 P.M. regular session.
Items for next meeting

1. _____ 2. _____

VIII. ADJOURNMENT

Approve adjournment at _____ P.M.

Moved by _____ Seconded by _____

Vote: yes ___ no ___



Patricia Edwards, President
Steve Sonder, Clerk
Julie Ralphs, Member

Gorman Elementary School District

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Johannis L. Andrews II
Superintendent/Principal

Superintendent's Report February 2020

Enrollment **65 Students**

District:

A Board member's resignation (Government Code 1770)

A vacancy resulting from resignation occurs when the written resignation is filed with the County Superintendent of Schools having jurisdiction over the district, except where a deferred effective date is specified in the resignation so filed, in which case the resignation shall become operative on that date. A Board member may not defer the effective date of his/her resignation for more than 60 days after he/she files the resignation with the County Superintendent. Upon being filed with the County Superintendent, a written resignation, whether specifying a deferred effective date or otherwise, shall be irrevocable. (Education Code 5090, 5091)

Timelines for Filling a Vacancy

When a vacancy occurs, the Board shall take the following action, as appropriate:

1. When a vacancy occurs within four months of the end of a Board member's term, the Board shall take no action. (Education Code 5093)
2. When a vacancy occurs longer than four months before the end of a Board member's term, the Board shall, within 60 days of the date of the vacancy or the filing of the member's deferred resignation, either order an election or make a provisional appointment, unless a special election is mandated as described in item #3 below. (Education Code 5091, 5093)
3. When a vacancy occurs from six months to 130 days before a regularly scheduled Board election at which the position is not scheduled to be filled, a special election to fill the position shall be consolidated with the regular election. The person so elected shall take office at the first regularly scheduled Board meeting following the certification of the election and shall serve only until the end of the term of the position which he/she was elected to fill. (Education Code 5093)

Eligibility

In order to be appointed or elected to fill a vacancy on the Board, a person must meet the eligibility requirements specified in Education Code 35107

Provisional Appointments

When authorized by law to make a provisional appointment to fill a vacancy on the Board, the Board shall advertise in the local media to solicit candidate applications or nominations. A committee consisting of less than a quorum of the Board shall ensure that applicants are eligible for Board membership and announce the names of the eligible candidates. The Board shall interview the candidates at a public meeting, accept oral or written public input, and select the provisional appointee by a majority vote.

Within 10 days after the appointment is made, the Board shall post notices of the actual vacancy, or the filing of a deferred resignation, and the provisional appointment. The notice shall be published in the local newspaper pursuant to Government Code 6061 and posted in at least three public places within the district. (Education Code 5092)

The notice shall contain: (Education Code 5092)

1. The date of the occurrence of the vacancy or the date of the filing of, and the effective date of, the resignation
2. The full name of the appointee
3. The date of appointment
4. A statement notifying the voters that unless a petition calling for a special election pursuant to Education Code 5091 is filed in the office of the County Superintendent within 30 days of the provisional appointment, it shall become an effective appointment

The person appointed shall hold office until the next regularly scheduled election for district Board members and shall be afforded all the powers and duties of a Board member upon appointment. (Education Code 5091)

Appointment Due to Failure to Elect

When a vacancy occurs because no candidate or an insufficient number of candidates have been nominated (i.e., a failure to elect) and a district election will not be held, the Board shall appoint a qualified person to the office. This appointment shall be made at a meeting prior to the day fixed for the election and the appointee shall be seated at the organizational meeting as if elected at the district election. (Education Code 5328)

When an appointment is being made because of a failure to elect, the district shall publish a notice once in a newspaper of general circulation published in the district, or if no such newspaper exists, in a newspaper having general circulation within the district. This notice

shall state that the Board intends to make an appointment and shall inform persons of the procedure available for applying for the appointment. (Education Code 5328.5)

The procedure for selecting and interviewing candidates shall be the same as the procedures for "Provisional Appointments," as specified above.

LCAP Development

The LCAP's first years have been learning experiences for everyone. A good goal now, and one that can be helpful to share with stakeholders, is to develop a revised LCAP that moves the district forward and maintains a commitment by stakeholders to stay engaged to improve on the quality of the LCAP's process for a three year period.

Gorman's Plan for Authentic Engagement

The engagement process has considered carefully what type of input is needed and how this will contribute to developing, implementing, and monitoring an LCAP that supports student performance. This process will help identify "who" should be engaged and "what" to ask that will solicit the contributions that further the process of planning for performance.

Stakeholders have received useful background and current information that supports their engagement and understanding of the LCFF and the LCAP, as well as what it means to support a performance-oriented process during the first community meeting on February 19th at 4:00 PM and March 12th at 5:30. Topics that stakeholders found helpful included a general explanation of the LCFF funding formula, the purpose of the LCAP, a refresher about current strategic plans and/or programs, and budgeting basics.

All stakeholders come to the process with a connection and interest in students. Reflecting on the question of "How will this help us improve outcomes for students?" will keep the conversation grounded.

State Budget:

- State Budget Update
 - 2.29% COLA - \$1.2 Billion increase to LCFF
 - \$900 million 1x put into several programs that support teacher training - high needs focus
 - \$250 million ongoing (intent) special education preschool
 - \$649 million special education base funding
 - Special Ed reform in phases over 3 years
 1. Blow up current model - use 3 year ADA count
 2. They are saying all districts will benefit - not released yet
 - No additional \$ for pensions this year
 - Governor's position is that we don't have enough to do this
 - ACSA has been trying to make the rounds to encourage
 - \$300 million one time for community schools - details light - more about accessing community resources - competitive grants -
 - \$300 million opportunity competitive grants - high poverty, low performing, intensive interventions
 - Audit of 3 districts - recommendation to mandate district tracking of supplemental/concentration

- Likely that the current practice of rolling over unspent Supplemental/Concentration money into base will not be changed with new bill
- Newsom's budgets will continue to look different than Jerry Brown. Unlikely to get unrestricted pots of money
- \$1.2 Billion in LCFF this year - \$1 Billion growth in just PERS STRS this year

Human Resources

- Hiring instructional aide support to help teachers with students needs in the classrooms.

Curriculum

- For this month's staff development training, staff will be retrained using the walk-through observation process to improve classroom instruction. The walk-through can be an effective strategy to promote teacher leadership and build professional learning communities. Once teachers are trained in the basic principles of the walk-through, it will be used in a variety of ways. Gorman teachers have agreed to visit each other's classrooms, focusing on consistency and coherence. Second, the walk-through process will take place after school and engage the entire staff in examining how classroom set-up and structures support student learning. Finally, teachers will be learning from each other in a non-evaluative way, talking about their craft, and developing lessons will improve student achievement.

Professional Development

- January 27-January 31, 2020, I attended ACSA's Superintendents' Symposium Conference. The program will be a balance of workshops and interactive sessions focusing on the hot topics facing the superintendency, including leadership, legislation, legal issues, budget, diversity and accountability.
- March 1- March 3, 2020, I will be attending the SSDA conference in Sacramento. The conference promotes workshops and interactive sessions focusing on small school district issues and leadership.

Facilities:

- Repair of the existing 15,000 gallon cistern (35' x 10' x 6'), for the front fire hydrant for the fire departments use. The cistern is leaking 3,000 gallons of water per day and is in need of repair to its interior walls with several cracks. Santana's repaired the reservoir/container for storing and holding the water for the fire department and replaced the liner in February of 2017.
- Gorman School needs to trim the trees at the school. It is recommended that the pine tree in the front of the school needs to be removed so it doesn't fall on the building. The most important and obvious reason to prune any kind of tree is to get rid of dead, diseased, or damaged branches.

This doesn't just keep people and property safe from any large limbs that could fall. It also promotes the health of the tree by preventing the spread of disease and ensuring that the tree uses energy to grow only the branches that are vigorous and intact.

But pruning doesn't just have to be practical or done in the case of an emergency. Trimming and removing a tree's branches can improve its look and the way it functions as part of a landscape:

- Controls a tree's overall size
- Encourages flowering, fruiting, and growth of certain parts of a tree
- Prevents larger, dead limbs from falling
- Removes useless parts like suckers and water sprouts that look thin and don't contribute to a healthy canopy of foliage

Rental:

The rental house improvement involves replacing the flooring, appliances in the kitchen, counter top and new sink in the kitchen and half bath, complete repair of the main bathroom shower and plumbing behind the wall because of a water leak, new shower fixture, hanging and finishing the drywall, door replacements, patching, replacing lighting (missing bulbs) septic repairs, pumping, replacing lines, and painting the inside and outside.

Maintenance 2019-2020:

- Repaving the worn out lower playground area is needed. The asphalt is cracked, leaving the area uneven and unsafe.
- Replacement/fix deteriorating pipes in staff restrooms.
- Replacement of kitchen drainage line to sewer connection.
- Pest control on the upper field some has been fixed somewhat with neighboring cats.
- Ramps repair in front of classrooms.
- Painting of the main building.
- Repair and painting of the rental property.

Budget

- The Office of Public School Construction (OPSC) received the District's Financial Hardship Project Worksheet on November 18, 2019. On December 3, 2019 I received notification that the District's Financial Hardship status was approved. Based on the review of the information submitted by the District, OPSC has determined that the District has \$191,620 available to contribute towards its projects and \$5,240 available as contribution due to exponents. Upon approval by the State Allocation Board assigning District contribution to a project, the District must transfer those funds to the County School Facility Fund.
- Approval of the Health Insurance: Gorman's group health insurance coverage is coming up for renewal on March 1, 2020. Gorman's new premium will increase by 9.43% over the current monthly rate. This is an estimate based on current enrollment and for the staff and it will be \$671.00 per month. Gorman is currently paying \$7,113 per month for staff/families health insurance and starting in March it will be paying \$7,784 for staff and families. Delta Dental will have no change in the current rate and will be the same for this next year, ending in February 2021. We are seeking comparable prices on any other plans available to us. Poms and Associates is checking on this for us.

Events

1. Students will be participating in the Pennies for Patients campaign with the Leukemia and Lymphoma Society. We will have a kickoff assembly on March 2nd to begin with our coin drive and continues until March 20th. Students and community members are encouraged to drop their spare change in a collection box located in their classroom or front office. This fantastic service-learning project will promote caring, citizenship, and team work amongst our students. Again, we're looking forward to helping a great organization that helps so many kids.
2. Parent/Teacher Conferences will be held during the afternoons of March 5th and 6th. Teachers will meet with parents of students who are in jeopardy of being retained and who are struggling with their core studies.
3. During the next several weeks, students will be taking the Common Core Practice.
4. 8th grade students will be selling chocolates as a graduation fundraiser.

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 01.0 - General Fund/County School Service Fund

Object	Object Description	Debit	Credit
1100	Teachers' Salaries	10,250.00	0.00
1110	Teachers' Salaries-Full-Time	87,733.79	0.00
1160	Teachers' Salaries-Substitute	28,207.50	0.00
1300	Cert Supervisors & Admin Sal	36,400.00	0.00
1310	Cert Supervisor & Admin Sal-FT	61,080.25	0.00
Totals for Major Object : 1000		223,671.54	0.00

Object	Object Description	Debit	Credit
2130	Instruct Aide Sal-Hourly/Daily	21,505.41	0.00
2200	Classif Support Sal	527.05	0.00
2210	Classif Support Sal-Full-Time	10,906.76	0.00
2410	Cler Tech Office Staff Sal-FT	42,136.31	0.00
2460	Cler Tech Off Staff Sal-Sub	8,694.27	0.00
2990	TBD	13,320.00	0.00
Totals for Major Object : 2000		97,089.80	0.00

Object	Object Description	Debit	Credit
3111	STRS, Certificated Positions	33,225.96	0.00
3311	OASDI, Certificated Positions	477.40	0.00
3312	OASDI, Classified Positions	4,755.46	0.00
3331	Medicare, Cert Positions	3,243.25	0.00
3332	Medicare, Class Positions	1,407.78	0.00
3411	Hlth & Wlfr Benefits, Cert	22,840.79	0.00
3412	Hlth & Wlfr Benefits, Class	33,924.11	0.00
3511	State Unemploy Insur, Cert Pos	111.85	0.00
3512	State Unemploy Insur, Clas Pos	44.15	0.00
3611	Worker Comp Insur, Cert Pos	4,473.15	0.00
3612	Worker Comp Insur, Class Pos	2,184.55	0.00
Totals for Major Object : 3000		106,688.45	0.00

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 01.0 - General Fund/County School Service Fund

Object	Object Description	Debit	Credit
4110	Textbooks	18,436.62	0.00
4210	Books & Oth Reference Material	893.83	0.00
4310	Materials and Supplies	9,298.05	0.00
4340	Computer Software & Relat Exp	10,048.80	0.00
4350	Office Supplies - Admin	460.37	0.00
4360	Tires, Fuel and Oil	2,660.29	0.00
4370	Custodial/Operation Supplies	418.96	0.00
4380	Maintenance Supplies	987.66	0.00
4400	NonCapitalized Equipment	2,685.05	0.00
4700	Food	359.40	0.00
Totals for Major Object : 4000		46,249.03	0.00

Object	Object Description	Debit	Credit
5210	Mileage & Car Allowances	1,151.70	0.00
5220	Travel and Conferences	5,514.67	0.00
5310	Dues and Memberships	6,261.00	0.00
5410	Insurance	10,105.00	0.00
5510	ELECTRICITY	7,862.79	0.00
5520	Natural Gas Services	1,841.58	0.00
5530	Water	437.03	0.00
5560	Waste Disposal	1,433.04	0.00
5565	Waste Disposal - Other	5,700.25	0.00
5610	Rentals, Leases and Repairs	2,303.16	0.00
5630	Repairs	7,087.04	0.00
5800	Oth Contracted Services	44,637.11	0.00
5803	Late Int Chrgs/Penalties	132.63	0.00
5812	Contract Srvc (2) - TBA	41,097.22	0.00
5820	Legal, Audit, & Election Costs	14,474.75	0.00
5830	Advertisement	690.69	0.00
5840	Computer/Technlgy Related Serv	4,231.50	0.00
5850	Const/Ind Contractors(NonEmp)	19,519.00	0.00
5860	Fingrprt,Phys, XRy&Oth Emp Cst	246.00	0.00
5880	Other Charges/Fees	407.75	0.00
5890	Other Services	171.56	0.00
5910	Communications	1,122.37	0.00
5940	Communication -Postage	900.00	0.00
Totals for Major Object : 5000		177,327.84	0.00

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 01.0 - General Fund/County School Service Fund

Object	Object Description	Debit	Credit
6400	Equipment	5,740.93	0.00
6510	Equipment Replacement	9,622.70	0.00
Totals for Major Object : 6000		15,363.63	0.00

Object	Object Description	Debit	Credit
8011	Rev Limit State Aid-CYr	0.00	352,667.00
8012	Education Protection Account E	0.00	69,799.00
8021	Home Owners Exemption	0.00	121.33
8029	Othr Subvntns/In-Lieu of Taxes	0.00	20.99
8041	Secured Tax Rolls	0.00	39,974.70
8042	Unsecured Roll Taxes	0.00	3,166.66
8043	Piror Year's Taxes	0.00	3,876.96
8044	Supplemental Taxes	0.00	84,259.78
8045	Edu RevAugmntn Fnd	0.00	1,896.13
8047	Commty Rdlvpmnt Funds	0.00	77.15
8048	Pnlts & Intrst from Dlgnt Tax	0.00	1,418.30
8085	RDA Asset Liquidation	0.00	908.32
8290	All Other Federal Revenues	0.00	2,718.00
8550	Manated Cost Reimbursements	0.00	2,390.00
8560	State Lottery	0.00	8,165.88
8590	All Other State Revenues	0.00	3,030.00
8650	Leases and Rentals	0.00	900.00
8660	Interest	0.00	20,685.56
8699	All Other Local Revenues	0.00	1,527.73
Totals for Major Object : 8000		0.00	597,603.49

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 01.0 - General Fund/County School Service Fund

Net Increase (Decrease) to Fund Balance :

(68,786.80)

Object	Object Description	Debit	Credit
9110	Cash In County Treasury	2,255,180.14	0.00
9130	Revolving Cash Account	2,000.00	0.00
9200	Accounts Receivable System Default- K12	248,827.22	0.00
9330	Prepaid Expenditures	550.00	0.00
9520	Accounts Payable Manual Accrual	0.00	297,586.47
9521	Accrued Salaries and Wages Payable	0.00	5,810.30
9525	Fringe Benefits - CALSTRS	0.00	10,813.82
9526	Fringe Benefits - CALPERS	0.00	834.97
9528	Fringe Benefits - OASDI	0.00	8,728.47
9529	Fringe Benefits - Medicare	0.00	8,340.29
9531	Fringe Benefits - SUI	1,273.16	0.00
9532	Fringe Benefits - W/C	0.00	21,327.22
9650	Unearned Revenue	0.00	169,424.03
9791	Beginning Fund Balance	0.00	2,051,528.27
9910	Suspense Clearing	0.00	2,223.48
(9791) Beginning Fund/Sub-Fund Balance :		0.00	2,051,528.27
ENDING Fund/Sub-Fund Balance :			1,982,741.47
Totals for Fund/Sub-Fund : 01.0 - General Fund/County School Service Fund		3,174,220.81	3,174,220.81

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 13.0 - Cafeteria Special Revenue Fund

Object	Object Description	Debit	Credit
2230	Classif Support Sal-Hrly/Dally	8,822.00	0.00
Totals for Major Object : 2000		8,822.00	0.00
Object	Object Description	Debit	Credit
3312	OASDI, Classified Positions	546.97	0.00
3332	Medicare, Class Positions	127.93	0.00
3412	Hlth & Wlfr Benefits, Class	1,992.62	0.00
3512	State Unemploy Insur, Clas Pos	4.40	0.00
3612	Worker Comp Insur, Class Pos	198.50	0.00
Totals for Major Object : 3000		2,870.42	0.00
Object	Object Description	Debit	Credit
4310	Materials and Supplies	28.31	0.00
4710	Food	19,579.00	0.00
4790	Food Supplies	15.86	0.00
Totals for Major Object : 4000		19,623.17	0.00
Object	Object Description	Debit	Credit
5220	Travel and Conferences	245.00	0.00
Totals for Major Object : 5000		245.00	0.00
Net Increase (Decrease) to Fund Balance :			(31,560.59)
Object	Object Description	Debit	Credit
9110	Cash In County Treasury	0.00	27,120.97
9200	Accounts Receivable System Default- K12	2,729.29	0.00
9521	Accrued Salaries and Wages Payable	0.02	0.00
9526	Fringe Benefits - CALPERS	34.66	0.00
9528	Fringe Benefits - OASDI	0.00	3,434.36
9529	Fringe Benefits - Medicare	0.00	241.92
9531	Fringe Benefits - SU1	0.00	135.07
9532	Fringe Benefits - W/C	0.00	2,012.07
9791	Beginning Fund Balance	0.00	1,380.17
(9791) Beginning Fund/Sub-Fund Balance :		0.00	1,380.17
ENDING Fund/Sub-Fund Balance :			-30,180.42
Totals for Fund/Sub-Fund : 13.0 - Cafeteria Special Revenue Fund		34,324.56	34,324.56

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 14.0 - Deferred Maintenance Fund

Object	Object Description	Debit	Credit
5630	Repairs	2,123.64	0.00
Totals for Major Object : 5000		2,123.64	0.00
Object	Object Description	Debit	Credit
6250	Building Construction/Improv	14,460.24	0.00
Totals for Major Object : 6000		14,460.24	0.00
Object	Object Description	Debit	Credit
8660	Interest	0.00	1,322.42
Totals for Major Object : 8000		0.00	1,322.42
Net Increase (Decrease) to Fund Balance :			(15,261.46)
Object	Object Description	Debit	Credit
9110	Cash In County Treasury	127,728.85	0.00
9200	Accounts Receivable System Default- K12	610.25	0.00
9791	Beginning Fund Balance	0.00	143,600.56
(9791) Beginning Fund/Sub-Fund Balance :		0.00	143,600.56
ENDING Fund/Sub-Fund Balance :			128,339.1
Totals for Fund/Sub-Fund : 14.0 - Deferred Maintenance Fund		144,922.98	144,922.98

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 21.0 - Building Fund

Object	Object Description	Debit	Credit
8660	Interest	0.00	645.89
Totals for Major Object : 8000		0.00	645.89
Net Increase (Decrease) to Fund Balance :			645.89
Object	Object Description	Debit	Credit
9110	Cash In County Treasury	65,624.12	0.00
9200	Accounts Receivable System Default- K12	309.44	0.00
9791	Beginning Fund Balance	0.00	65,287.67
(9791) Beginning Fund/Sub-Fund Balance :		0.00	65,287.67
ENDING Fund/Sub-Fund Balance :			65,933.56
Totals for Fund/Sub-Fund : 21.0 - Building Fund		65,933.56	65,933.56

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 25.0 - Capital Facilities Fund

Object	Object Description	Debit	Credit
8660	Interest	0.00	456.12
Totals for Major Object : 8000		0.00	456.12
Net Increase (Decrease) to Fund Balance :			456.12
Object	Object Description	Debit	Credit
9110	Cash In County Treasury	46,342.68	0.00
9200	Accounts Receivable System Default- K12	218.45	0.00
9791	Beginning Fund Balance	0.00	46,105.01
(9791) Beginning Fund/Sub-Fund Balance :		0.00	46,105.01
ENDING Fund/Sub-Fund Balance :			46,561.13
Totals for Fund/Sub-Fund : 25.0 - Capital Facilities Fund		46,561.13	46,561.13

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 30.0 - State School Building Lease-Purchase Fund

Object	Object Description	Debit	Credit
6510	Equipment Replacement	61,610.59	0.00
Totals for Major Object : 6000		61,610.59	0.00

Object	Object Description	Debit	Credit
8660	Interest	0.00	526.48
Totals for Major Object : 8000		0.00	526.48
Net Increase (Decrease) to Fund Balance :			(61,084.11)

Object	Object Description	Debit	Credit
9110	Cash In County Treasury	6,357.83	0.00
9200	Accounts Receivable System Default- K12	190.36	0.00
9791	Beginning Fund Balance	0.00	67,632.30
(9791) Beginning Fund/Sub-Fund Balance :		0.00	67,632.30
ENDING Fund/Sub-Fund Balance :			6,548.19
Totals for Fund/Sub-Fund : 30.0 - State School Building Lease-Purchase Fund		68,158.78	68,158.78

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 35.0 - County School Facilities Fund

Object	Object Description	Debit	Credit
8660	Interest	0.00	124.61
Totals for Major Object : 8000		0.00	124.61
Net Increase (Decrease) to Fund Balance :			124.61
Object	Object Description	Debit	Credit
9110	Cash In County Treasury	12,660.16	0.00
9200	Accounts Receivable System Default- K12	59.27	0.00
9519	Accounts Payable System Default	0.00	0.12
9791	Beginning Fund Balance	0.00	12,594.70
(9791) Beginning Fund/Sub-Fund Balance :		0.00	12,594.70
ENDING Fund/Sub-Fund Balance :			12,719.31
Totals for Fund/Sub-Fund : 35.0 - County School Facilities Fund		12,719.43	12,719.43

Report ID: FIN-GL-0003

Run Date: 2/6/20

Run Time: 12:27:34 PM

Trial Balance by Fund and Object (ALL)

Fiscal Year : 2020 To Record Date : 1/31/2020

District/Agency : 64584 - Gorman Joint School District

Fund/Sub-Fund : 76.0 - Warrant/Pass-Through Fund

Net Increase (Decrease) to Fund Balance :

Object	Object Description	Debit	Credit
9110	Cash In County Treasury	0.00	17,261.47
9200	Accounts Receivable System Default- K12	0.00	16,185.64
9506	State Disability Insurance	21.23	0.00
9507	Medicare Contributions	0.00	34,073.78
9508	Advanced Earned Income Credit	55.00	0.00
9511	Federal Tax Withholding	94,455.47	0.00
9512	State Tax Withholding	0.00	766.10
9513	OASDI Liability	0.00	28,796.05
9514	CALSTRS Liability	0.00	2,045.22
9515	CALPERS Liability	3.41	0.00
9517	Other Voluntary Deductions	5,133.87	0.00
9518	Tax Shelter Annuity	0.00	2,600.00
9519	Accounts Payable System Default	0.00	469.12
9527	Fringe Benefits - EPRS	0.00	1,651.50
9528	Fringe Benefits - OASDI	243.53	0.00
9529	Fringe Benefits - Medicare	60.57	0.00
9531	Fringe Benefits - SUI	3,875.80	0.00
(9791) Beginning Fund/Sub-Fund Balance :		0.00	0.00
ENDING Fund/Sub-Fund Balance :			
Totals for Fund/Sub-Fund : 76.0 - Warrant/Pass-Through Fund		103,848.88	103,848.88
Totals for District/Agency : 64584 - Gorman Joint School District		3,650,690.13	6,038,818.81



Gorman Elementary School

"Paw Prints" Newsletter

February 2020

A MESSAGE FROM THE PRINCIPAL

As we progress through 2020, we are preparing for exciting fundraisers. This year we will continue participating in a program called Pennies for Patients. The program is led by the Leukemia & Lymphoma Society. They are the leaders in blood cancer research. Pennies for Patients helps raise money for children and adults battling different types of blood cancer. Together we can change cancer.

The 8th grade graduating class will also be starting a fundraiser soon. They are selling World's Finest Chocolate to help raise money for their end of the year field trips. The chocolate sales will fund Grad Night, as well as the 8th grade trip. Grad Night will be held at Universal Studios this year. Fundraising is a great way for our 8th graders to get involved with their graduation trips.

Beginning in April we will start our CAASPP testing. With spring break quickly approaching, our teachers are working diligently to prepare your student's for all of their upcoming CAASPP testing. These tests will be done online during the last two weeks of April and the first two weeks of May.

Our upcoming Local Control and Accountability Plan (LCAP) meetings are set for February 19th from 4 p.m. to 5 p.m. and March 12th from 5:30 p.m. to 6:30 p.m. All parents, guardians, and community members are encouraged to join us for both meetings. These meetings are meant to help improve student outcomes, through good communication with all involved. We look forward to discussing with all families and community members on February 19th and March 12th.

UPCOMING EVENTS

February

10 Lincoln's Birthday
No School

14 Valentine's Day

17 President's Day
No school

19 LCAP Meeting 4:00 p.m.

28 End of 2nd Trimester

March

2-20 Pennies for Patients

5 Parent Teacher Conferences
Minimum Day

6 Report Cards Sent Home



MR. SANDERS' CLASS

Hello Gorman Parents,

I hope everyone is doing well. Here's an update on what we are up to:

Our 7th and 8th graders are busy working on their writing assignments. 7th grade is writing Informational Essays and 8th grade is writing a Literary Analysis.

For math, the 7th graders are studying geometry and the 8th graders continue working on algebra.

In Science, 7th just finished the Rock Cycle and they are moving on to the theory of evolution, while the 8th graders are moving on to the different states of matter.

For History, the 7th graders are finishing up their China Project, and they are moving on to Medieval Africa. The 8th graders are learning about the causes of the Revolutionary War.

We are now playing basketball during PE. We have PE four days a week. Make sure your child is wearing shoes that are appropriate for sports. If there are any parents that want to come help with basketball let me know. On another note, I would love to see everyone participating in our up-coming Penny drive. Fighting cancer is such an important cause. Also, please fill out the Parent Survey that went home. It's on pink paper. It's important for the school to get your feedback.

Happy Valentine's Day!

Mr. Sanders



Your 2020 renewal checklist

This checklist makes it easy to complete your 2020 renewal. If your group is undergoing a recertification review, this renewal or any changes you submit won't be effective until your group has received approval to renew from our Recertification Department. Visit kp.org/smallbusiness-recertification/ca for more information.

1. Review your 2020 plan(s) and premium.

If you like your current coverage and don't want to make any plan or employee changes, please skip to step 4.

2. Make plan changes.

- **Renewal Options and Plan Benefits:** This section can help you decide which plan options are right for your business. Many employees like being able to choose from a selection of plan and cost-share options.
- **Plan Highlights and Small Business Guidelines:** For more information about all the plans we offer and for policy and qualification guidelines, visit kp.org/smallbusinessrenewals/ca.
- **Health savings account (HSA) and health reimbursement arrangement (HRA) options:** Learn about the advantages of pairing an HDHP or HRA medical plan with an HSA or HRA administered through Kaiser Permanente. See the "Health Payment Accounts" page in the Plan Highlights. Please also call our Small Business Services Customer Connection Team at 800-790-4661, option 3, to find out about additional required documents and administration fees for these options.

3. Make enrollee or dependent changes.

To make enrollee or dependent changes, download the most current versions of our forms at kp.org/smallbusinessforms/ca:

- **Employee Enrollment:** Add employees and their dependents.
- **Employee/Dependent Change:** Update employee and dependent information.
- **Subscriber Termination and Transfer:** Terminate coverage for an employee and dependent. Fax your completed forms to 855-355-5334

4. Continue to meet grandfathered (nonmetal) plan requirements.

If you have grandfathered (nonmetal) plans, see the "Understanding your grandfathered (nonmetal) plans" section of this booklet. Make sure any grandfathered (nonmetal) plans continue to meet grandfathering requirements including but not limited to, the requirements regarding employer contribution rates. If any of your grandfathered (nonmetal) plans no longer qualifies for renewal, then you'll need to cancel or replace it. Please note that your group contract will include a representation regarding continued compliance with the requirements for offering grandfathered health plan(s) to your group including your group's contribution rate. Your group is obligated to give immediate notice to Health Plan of any material changes to such grandfathered health plan(s) during the plan year that would cause the loss of grandfathered status of the plan(s).



KAISER PERMANENTE®

5. Review your ERIISA status.

If your Employee Retirement Income Security Act (ERISA) status shown on the "2020 renewal changes" form is incorrect, please update and fax the requested information to **800-369-8010**, or email it to **amt@kp.org**:

6. Submit your changes before your renewal effective date.

Complete the "2020 renewal changes" form to request any plan changes before your renewal date. **Note:** If you decide to cancel any grandfathered (nonmetal) plans, you won't be able to go back to it.

- Please be sure to sign and submit **all sections (1-10)** of the form by the 1st of your renewal effective month to **amt@kp.org**, or fax it to **800-369-8010**.

- Plan changes received by 5 p.m. Pacific time (PT) on the 15th of the month will be applied retroactively to the 1st of your renewal month. Plan changes received after 5 p.m. PT on the 15th of the month will be effective on the 1st of the following month.

You'll receive a plan change acknowledgment letter when the request is approved.

7. Provide your employees and their dependents with SBCs.

Under the Affordable Care Act (ACA), you're required to give Summary of Benefits and Coverage (SBC) documents to employees and dependents for the plans they enroll in. For more information about SBCs, please visit kp.org/smallbusiness-sbc/ca.

Important reminder about our deductible funding policy

Please note the following restrictions to funding employees' health reimbursement arrangements (HRAs), medical expense reimbursement plans (MERPs), or similar arrangements.

- If you offer a Kaiser Permanente deductible HMO plan with HRA, you must contribute to your employees' health reimbursement accounts.
- You can fund an employee's Health Savings Account (HSA) only if the employee is enrolled in an HSA-qualified High Deductible Health Plan (HDHP). Contributions must be made in accordance with the federal tax laws for HSAs.

Other than the 2 situations above, directly funding or reimbursing employees for any Kaiser Permanente deductibles, coinsurance, or copays violates our deductible funding policy. Doing so could make you subject to termination or nonrenewal.* This includes employer reimbursement of employee cost sharing through flexible spending accounts (FSAs).

Brokers who advise small business clients to fund or directly reimburse employees for deductible plan expenses in violation of our policies won't receive sales commissions (or reward compensation) from Kaiser Permanente. If we discover that a broker has repeatedly violated this policy, we reserve the right to immediately terminate the broker agreement.

*Not applicable to PPO medical plans.



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Your Kaiser Permanente Portfolio

Current Medical Plans	Renewal Medical Plans
\$20 Copayment Plan (0.95 RAF, Rate Area 5)	\$20 Copayment Plan (1.00 RAF, Rate Area 5)
Contribution to Employee Medical Plan Premium	Contribution to Dependent Medical Plan Premium
50% of the premium for the plan the employee enrolls in	Not contributing
Current Dental Plans	Renewal Dental Plans
Not offered	Not offered
Current Grandfathered Plan Chiro/Acu Rider	Renewal Grandfathered Plan Chiro/Acu Rider
Not offered	Not offered



Medical Plan Renewal Rates

The \$0.00 rate shown for dependents enrolled on grandfathered plans indicates that the cost for dependent coverage is included in the employee's rate.

Employee Name	Status	Age at Renewal	Tier	Current Medical Plan	Renewal Medical Plan	Current Rate	Renewal Rate	% Change	\$ Change
1 Andrews, Johannis	Employee	61	Employee	\$20 Copayment Plan	\$20 Copayment Plan	\$910.00	\$996.00	9.45%	\$86.00
					Employee Total	\$910.00	\$996.00	9.45%	\$86.00
2 Knight, Lori	Employee	56	Employee	\$20 Copayment Plan	\$20 Copayment Plan	\$738.00	\$808.00	9.49%	\$70.00
					Employee Total	\$738.00	\$808.00	9.49%	\$70.00
3 Lemaire, Michele	Employee	45	Employee	\$20 Copayment Plan	\$20 Copayment Plan	\$449.00	\$491.00	9.35%	\$42.00
					Employee Total	\$449.00	\$491.00	9.35%	\$42.00
4 Paz, Maria	Employee	46	Employee + Family	\$20 Copayment Plan	\$20 Copayment Plan	\$1,363.00	\$1,491.00	9.39%	\$128.00
	Spouse	46				\$0.00	\$0.00		
	Dependent	25				\$0.00	\$0.00		
	Dependent	24				\$0.00	\$0.00		
	Dependent	14				\$0.00	\$0.00		
					Employee Total	\$1,363.00	\$1,491.00	9.39%	\$128.00
5 Ramirez, Laura	Employee	54	Employee + Family	\$20 Copayment Plan	\$20 Copayment Plan	\$1,552.00	\$1,699.00	9.47%	\$147.00
	Spouse	54				\$0.00	\$0.00		
	Dependent	23				\$0.00	\$0.00		
					Employee Total	\$1,552.00	\$1,699.00	9.47%	\$147.00
6 Rogers, Susan	Employee	59	Employee	\$20 Copayment Plan	\$20 Copayment Plan	\$738.00	\$808.00	9.49%	\$70.00
					Employee Total	\$738.00	\$808.00	9.49%	\$70.00



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Medical Plan Renewal Rates (continued)

The \$0.00 rate shown for dependents enrolled on grandfathered plans indicates that the cost for dependent coverage is included in the employee's rate.

Employee Name	Status	Age at Renewal	Tier	Current Medical Plan	Renewal Medical Plan	Current Rate	Renewal Rate	% Change	\$ Change
7 Saenz, Denise	Employee	42	Employee + Family	\$20 Copayment Plan	\$20 Copayment Plan	\$1,363.00	\$1,491.00	9.39%	\$128.00
	Spouse	47				\$0.00	\$0.00		
	Dependent	22				\$0.00	\$0.00		
	Dependent	16				\$0.00	\$0.00		
	Dependent	11				\$0.00	\$0.00		
Employee Total						\$1,363.00	\$1,491.00	9.39%	\$128.00

Total Employee Premium	\$4,317.00	\$4,724.00	9.43%	\$407.00
Total Dependent Premium	\$2,796.00	\$3,060.00	9.44%	\$264.00
Total Monthly Premium	\$7,113.00	\$7,784.00	9.43%	\$671.00



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Chiropractic/Acupuncture Rider Renewal Rates

Employee Name	Status	Tier	Current Chiro/Acu Rider	Renewal Chiro/Acu Rider	Current Rate	Renewal Rate	% Change	\$ Change
1 Andrews, Johannis	Employee	Employee						
2 Knight, Lori	Employee	Employee						
3 Lemaire, Michele	Employee	Employee						
4 Paz, Maria	Employee	Employee + Family						
5 Ramirez, Laura	Employee	Employee + Family						
6 Rogers, Susan	Employee	Employee						
7 Saenz, Denise	Employee	Employee + Family						

Total Monthly Premium



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Renewal Options: HMO Plans

Employee Name	Status	Age at Renewal	Tier	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/15 + Child Dental	Gold 80 HMO 250/25 + Child Dental	Gold 80 HMO 500/30 + Child Dental Alt	Gold 80 HRA HMO 2250/35 + Child Dental
1 Andrews, Johannis	Employee	61	Employee	\$1,064.15	\$1,052.97	\$929.50	\$919.66	\$827.39
2 Knight, Lori	Employee	56	Employee	\$883.51	\$874.23	\$771.72	\$763.55	\$686.94
3 Lemaire, Michele	Employee	45	Employee	\$546.84	\$541.10	\$477.65	\$472.59	\$425.18
4 Paz, Maria	Employee	46	Employee + Family	\$568.05	\$562.08	\$496.17	\$490.92	\$441.67
	Spouse	46		\$568.05	\$562.08	\$496.17	\$490.92	\$441.67
	Dependent	25		\$380.22	\$376.22	\$332.11	\$328.59	\$295.62
	Dependent	24		\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
	Dependent	14		\$303.70	\$300.65	\$267.04	\$264.36	\$239.24
5 Ramirez, Laura	Employee	54	Employee + Family	\$808.53	\$800.03	\$706.22	\$698.74	\$628.64
	Spouse	54		\$808.53	\$800.03	\$706.22	\$698.74	\$628.64
	Dependent	23		\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
6 Rogers, Susan	Employee	59	Employee	\$985.76	\$975.40	\$861.03	\$851.91	\$766.44
7 Saenz, Denise	Employee	42	Employee + Family	\$501.78	\$496.51	\$438.29	\$433.65	\$390.14
	Spouse	47		\$591.91	\$585.69	\$517.01	\$511.54	\$460.22
	Dependent	22		\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
	Dependent	16		\$339.29	\$335.88	\$298.13	\$295.12	\$266.92
	Dependent	11		\$303.70	\$300.65	\$267.04	\$264.36	\$239.24

Total Employee Premium	\$5,358.62	\$5,302.32	\$4,680.58	\$4,631.02	\$4,166.40
Total Dependent Premium	\$4,431.50	\$4,385.36	\$3,878.06	\$3,835.47	\$3,454.87
Total Monthly Premium	\$9,790.12	\$9,687.68	\$8,558.64	\$8,466.49	\$7,621.27

Differential from current premium if all members renew on this plan

37.64% 36.20% 20.30% 19.03% 7.15%



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Renewal Options: HMO Plans (continued)

Employee Name	Status	Age at Renewal	Tier	Silver 70 HMO 1650/55 + Child Dental Alt	Silver 70 HMO 1800/55 + Child Dental Alt	Silver 70 HMO 2250/50 + Child Dental	Silver 70 HDHP HMO 2500/20% + Child Dental	Bronze 60 HMO 6300/65 + Child Dental
1 Andrews, Johannis	Employee	61	Employee	\$767.21	\$753.87	\$792.79	\$708.26	\$648.03
2 Knight, Lori	Employee	56	Employee	\$636.98	\$625.90	\$658.21	\$588.03	\$538.02
3 Lemaire, Michele	Employee	45	Employee	\$394.25	\$387.40	\$407.40	\$363.96	\$333.01
4 Paz, Maria	Employee	46	Employee + Family	\$409.54	\$402.42	\$423.20	\$378.08	\$345.92
	Spouse	46		\$409.54	\$402.42	\$423.20	\$378.08	\$345.92
	Dependent	25		\$274.12	\$269.35	\$283.26	\$253.06	\$231.54
	Dependent	24		\$273.03	\$268.28	\$282.13	\$252.05	\$230.61
	Dependent	14		\$222.86	\$219.22	\$229.82	\$206.81	\$190.41
5 Ramirez, Laura	Employee	54	Employee + Family	\$582.92	\$572.78	\$602.35	\$538.13	\$492.36
	Spouse	54		\$582.92	\$572.78	\$602.35	\$538.13	\$492.36
	Dependent	23		\$273.03	\$268.28	\$282.13	\$252.05	\$230.61
6 Rogers, Susan	Employee	59	Employee	\$710.69	\$698.33	\$734.39	\$656.09	\$600.29



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Renewal Options: HMO Plans (continued)

Employee Name	Status	Age at Renewal	Tier	Silver 70 HMO 1650/55 + Child Dental/Alt	Silver 70 HMO 1800/55 + Child Dental/Alt	Silver 70 HMO 2250/50 + Child Dental	Silver 70 HDHP HMO 2500/20% + Child Dental	Bronze 60 HMO 6300/65 + Child Dental
7 Saenz, Denise	Employee	42	Employee + Family	\$361.76	\$355.47	\$373.82	\$333.97	\$305.56
	Spouse	47		\$426.74	\$419.32	\$440.97	\$393.96	\$360.45
	Dependent	22		\$273.03	\$268.28	\$282.13	\$252.05	\$230.61
	Dependent	16		\$248.52	\$244.44	\$256.34	\$230.50	\$212.09
	Dependent	11		\$222.86	\$219.22	\$229.82	\$206.81	\$190.41

Total Employee Premium	\$3,863.35	\$3,796.17	\$3,992.16	\$3,566.52	\$3,263.19
Total Dependent Premium	\$3,206.65	\$3,151.59	\$3,312.15	\$2,963.50	\$2,715.01
Total Monthly Premium	\$7,070.00	\$6,947.76	\$7,304.31	\$6,530.02	\$5,978.20

Differential from current premium if all members renew on this plan

-0.60% -2.32% 2.69% -8.20% -15.95%



Renewal Options: HMO Plans (continued)

Employee Name	Status	Age at Renewal	Tier	Bronze 60 HDHP HMO 6900/0 + Child Dental
1 Andrews, Johannis	Employee	61	Employee	\$610.93
2 Knight, Lori	Employee	56	Employee	\$507.22
3 Lemaire, Michele	Employee	45	Employee	\$313.94
4 Paz, Maria	Employee	46	Employee + Family	\$326.12
	Spouse	46		\$326.12
	Dependent	25		\$218.28
	Dependent	24		\$217.41
	Dependent	14		\$180.31
5 Ramirez, Laura	Employee	54	Employee + Family	\$464.17
	Spouse	54		\$464.17
	Dependent	23		\$217.41
6 Rogers, Susan	Employee	59	Employee	\$565.92
7 Saenz, Denise	Employee	42	Employee + Family	\$288.07
	Spouse	47		\$339.81
	Dependent	22		\$217.41
	Dependent	16		\$200.75
	Dependent	11		\$180.31

Total Employee Premium	\$3,076.37
Total Dependent Premium	\$2,561.98
Total Monthly Premium	\$5,638.35

Differential from current premium
 if all members renew on this plan
 -20.73%



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

HMO Plan Benefits

Summary of Benefits and Coverage (SBC) documents for all our plans are available at kp.org/smallbusiness-sbc/ca. SBCs include information to help employees make the right plan choice based on their needs, and you are required to provide eligible employees with SBCs for your renewal plan(s) or for any plan(s) you change to in the future. For more information about plan benefits and restrictions, refer to the plan highlight information at kp.org/smallbusinessplans/ca.

Benefits/Services	Platinum 90 HMO 0/10 + Child Dental Alt	Platinum 90 HMO 0/15 + Child Dental	Gold 80 HMO 250/25 + Child Dental	Gold 80 HMO 500/30 + Child Dental/Alt	Gold 80 HRA/HMO 2250/35 + Child Dental
Plan Deductible	\$0	\$0	\$250 \$500	\$500 Individual \$1,000 Family	\$2,250 Individual \$4,500 Family
Out-of-Pocket (OOP) Maximum	\$3,000 Individual \$6,000 Family	\$4,500 Individual \$9,000 Family	\$7,800 Individual \$15,600 Family	\$7,000 Individual \$14,000 Family	\$7,800 Individual \$15,600 Family
Primary Care Visits	\$10	\$15	\$25	\$30	\$35
Specialty Care Visits	\$20	\$30	\$50	\$35	\$50
Outpatient Surgery	\$300	\$125	\$340	\$600 (after deductible)	25% (after deductible)
Emergency Visits	\$200	\$150	\$250 (after deductible)	\$250 (after deductible)	25% (after deductible)
Inpatient Hospital Care	\$500 per admission	\$250 per day up to 5 days per admission	\$600 per day up to 5 days per admission (after deductible)	\$600 per day up to 5 days per admission (after deductible)	25% (after deductible)
Prescriptions					
Generic Up to a 30-day supply	\$5	\$5	\$15	\$15	\$15
Brand Up to a 30-day supply	\$15	\$15	\$50	\$50	\$30 (after \$100 drug deductible)
Specialty Up to a 30-day supply	10% up to \$250 maximum	10% up to \$250 maximum	20% up to \$250 maximum	20% up to \$250 maximum	20% (after \$100 drug deductible) up to \$250 maximum



GORMAN ELEMENTARY SCHOOL DISTRICT
Group ID: 296596
Renewal Effective Date: March 01, 2020
Medical Rate Area: 16
Dental Rate Area: 2

HMO Plan Benefits (continued)

Benefits/Services	Silver 70 HMO 1650/55 + Child Dental Alt	Silver 70 HMO 1800/55 + Child Dental Alt	Silver 70 HMO 2250/50 + Child Dental	Silver 70 HDHP HMO 2500/20% + Child Dental	Bronze 60 HMO 6300/65 + Child Dental
Plan Deductible	\$1,650 Individual \$3,300 Family	\$1,800 Individual \$3,600 Family	\$2,250 Individual \$4,500 Family	\$2,500 Individual \$2,800 Self-only \$5,000 Family	\$6,300 Individual \$12,600 Family
Out-of-Pocket (OOP) Maximum	\$7,800 Individual \$15,600 Family	\$7,800 Individual \$15,600 Family	\$7,800 Individual \$15,600 Family	\$6,850 Individual \$13,700 Family	\$7,800 Individual \$15,600 Family
Primary Care Visits	\$55	\$55	\$50	20% (after deductible)	\$65 (after deductible)
Specialty Care Visits	\$80	\$75	\$85	20% (after deductible)	\$95 (after deductible)
Outpatient Surgery	40% (after deductible)	45% (after deductible)	20%	20% (after deductible)	40% (after deductible)
Emergency Visits	40% (after deductible)	45% (after deductible)	\$400 (after deductible)	20% (after deductible)	40% (after deductible)
Inpatient Hospital Care	40% (after deductible)	45% (after deductible)	20% (after deductible)	20% (after deductible)	40% (after deductible)
Prescriptions					
Generic <i>Up to a 30-day supply</i>	\$20	\$20	\$17 (after \$300 drug deductible)	20% up to \$250 maximum (after deductible)	\$18 (after \$500 drug deductible) 40% up to \$500 maximum (after \$500 drug deductible)
Brand <i>Up to a 30-day supply</i>	\$75 (after \$350 drug deductible)	\$75 (after \$350 drug deductible)	\$65 (after \$300 drug deductible)	20% up to \$250 maximum (after deductible)	40% up to \$500 maximum (after \$500 drug deductible)
Specialty <i>Up to a 30-day supply</i>	20% up to \$250 maximum (after \$350 drug deductible)	20% up to \$250 maximum (after \$350 drug deductible)	20% up to \$250 maximum (after \$300 drug deductible)	20% up to \$250 maximum (after deductible)	40% up to \$500 maximum (after \$500 drug deductible)



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

HMO Plan Benefits (continued)

Benefits/Services	Bronze 60 HDHP HMO 6900/0 + Child Dental
Plan Deductible	\$6,900 Individual \$13,800 Family
Out-of-Pocket (OOP) Maximum	\$6,900 Individual \$13,800 Family
Primary Care Visits	\$0 (after deductible)
Specialty Care Visits	\$0 (after deductible)
Outpatient Surgery	\$0 (after deductible)
Emergency Visits	\$0 (after deductible)
Inpatient Hospital Care	\$0 (after deductible)
Prescriptions	
Generic <i>Up to a 30-day supply</i>	\$0 (after deductible)
Brand <i>Up to a 30-day supply</i>	\$0 (after deductible)
Specialty <i>Up to a 30-day supply</i>	\$0 (after deductible)



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Renewal Options: PPO Insurance Plans

Employee Name	Status	Age at Renewal	Tier	Platinum 90 PPO 0/15 + Child Dental	Gold 80 PPO 250/25 + Child Dental	Silver 70 PPO 2250/50 + Child Dental	Bronze 60 PPO 6300/65 + Child Dental
1 Andrews, Johannis	Employee	61	Employee	\$2,004.62	\$1,761.71	\$1,525.42	\$1,200.69
2 Knight, Lori	Employee	56	Employee	\$1,664.34	\$1,462.65	\$1,266.48	\$996.87
3 Lemaire, Michele	Employee	45	Employee	\$1,030.13	\$905.30	\$783.88	\$617.01
4 Paz, Maria	Employee	46	Employee + Family	\$1,070.08	\$940.41	\$814.28	\$640.94
	Spouse	46		\$1,070.08	\$940.41	\$814.28	\$640.94
	Dependent	25		\$716.24	\$629.45	\$545.03	\$429.00
	Dependent	24		\$713.39	\$626.94	\$542.86	\$427.29
	Dependent	14		\$545.74	\$479.61	\$415.28	\$326.88
5 Ramirez, Laura	Employee	54	Employee + Family	\$1,523.09	\$1,338.52	\$1,159.00	\$912.26
	Spouse	54		\$1,523.09	\$1,338.52	\$1,159.00	\$912.26
	Dependent	23		\$713.39	\$626.94	\$542.86	\$427.29
6 Rogers, Susan	Employee	59	Employee	\$1,856.95	\$1,631.93	\$1,413.05	\$1,112.24
7 Saenz, Denise	Employee	42	Employee + Family	\$945.24	\$830.70	\$719.28	\$566.16
	Spouse	47		\$1,115.03	\$979.91	\$848.48	\$667.85
	Dependent	22		\$713.39	\$626.94	\$542.86	\$427.29
	Dependent	16		\$612.80	\$538.54	\$466.31	\$367.04
	Dependent	11		\$545.74	\$479.61	\$415.28	\$326.88

Total Employee Premium	\$10,094.45	\$8,871.22	\$7,681.39	\$6,046.17
Total Dependent Premium	\$8,268.89	\$7,266.87	\$6,292.24	\$4,952.72
Total Monthly Premium	\$18,363.34	\$16,138.09	\$13,973.63	\$10,998.89

Differential from current premium
 if all members renew on this plan

158.17% 126.88% 96.45% 54.63%



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

PPO Insurance Plan Benefits

Summary of Benefits and Coverage (SBC) documents for all our plans are available at kp.org/smallbusiness-sbc/ca. SBCs include information to help employees make the right plan choice based on their needs, and you are required to provide eligible employees with SBCs for your renewal plan(s) or for any plan(s) you change to in the future. For more information about plan benefits and restrictions, refer to the plan highlight information at kp.org/smallbusinessplans/ca.

Benefits/Services	Platinum 90 PPO 0/15 + Child Dental		Gold 80 PPO 250/25 + Child Dental	
	Participating Providers (In-network)	Non-Participating Providers (out-of-network)	Participating Providers (In-network)	Non-Participating Providers (out-of-network)
Plan Deductible	\$0	\$500 Individual \$1,000 Family	\$250	\$1,000 Individual \$2,000 Family
Out-of-Pocket (OOP) Maximum	\$4,500 Individual \$9,000 Family	\$9,000 Individual \$18,000 Family	\$7,800 Individual \$15,600 Family	\$15,600 Individual \$31,200 Family
Primary Care Visits	\$15	30% (after deductible)	\$25	40% (after deductible)
Specialty Care Visits	\$30	30% (after deductible)	\$50	40% (after deductible)
Outpatient Surgery	10%	30% (after deductible)	20%	40% (after deductible)
Emergency Visits	\$150	\$150	\$250 (after deductible)	\$250 (after deductible)
Inpatient Hospital Care	10%	30% (after deductible)	20% (after deductible)	40% (after deductible)
Prescriptions				
Generic <i>Up to a 30-day supply</i>	\$5	\$5	\$15	\$15
Brand <i>Up to a 30-day supply</i>	\$15	\$15	\$50	\$50
Specialty <i>Up to a 30-day supply</i>	10% up to \$250 maximum	10% up to \$250 maximum	20% up to \$250 maximum	20% per prescription up to \$250 maximum



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

PPO Insurance Plan Benefits (continued)

Benefits/Services	Silver 70 PPO 2250/50 + Child Dental		Bronze 60 PPO 6300/65 + Child Dental	
	Participating Providers (in-network)	Non-Participating Providers (out-of-network)	Participating Providers (in-network)	Non-Participating Providers (out-of-network)
Plan Deductible	\$2,250 Individual \$4,500 Family	\$4,500 Individual \$9,000 Family	\$6,300 Individual \$12,600 Family	\$12,600 Individual \$25,200 Family
Out-of-Pocket (OOP) Maximum	\$7,800 Individual \$15,600 Family	\$15,600 Individual \$31,200 Family	\$7,800 Individual \$15,600 Family	\$15,600 Individual \$31,200 Family
Primary Care Visits	\$50	40% (after deductible)	\$65 (after deductible)	100% (up to OOP maximum)
Specialty Care Visits	\$85	40% (after deductible)	\$95 (after deductible)	100% (up to OOP maximum)
Outpatient Surgery	20%	40% (after deductible)	40% (after deductible)	100% (up to OOP maximum)
Emergency Visits	\$400 (after deductible)	\$400 (after deductible)	40% (after deductible)	40% (up to OOP maximum)
Inpatient Hospital Care	20% (after deductible)	40% (after deductible)	40% (after deductible)	100% (up to OOP maximum)
Prescriptions				
Generic <i>Up to a 30-day supply</i>	\$17 (after \$300 drug deductible)	\$17 (after \$300 drug deductible)	\$18 (after \$500 drug deductible)	\$18 (after \$500 drug deductible)
Brand <i>Up to a 30-day supply</i>	\$65 (after \$300 drug deductible)	\$65 (after \$300 drug deductible)	40% up to \$500 maximum (after \$500 drug deductible)	40% up to \$500 maximum (after \$500 drug deductible)
Specialty <i>Up to a 30-day supply</i>	20% up to \$250 maximum (after \$300 drug deductible)	20% up to \$250 maximum (after \$300 drug deductible)	40% up to \$500 maximum (after \$500 drug deductible)	40% up to \$500 maximum (after \$500 drug deductible)



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Renewal Options: Family Dental Plans—KPIC PPO and DeltaCare HMO

Dental rates are based on the ZIP code of your business location.

Employee Name	Status	Tier	KPIC PPO D 1500	KPIC PPO E 1000	KPIC PPO E 1500	DeltaCare HMO 10A	DeltaCare HMO 13B
1 Andrews, Johannis	Employee	Employee	\$32.53	\$43.64	\$45.82	\$19.70	\$13.99
2 Knight, Lori	Employee	Employee	\$32.53	\$43.64	\$45.82	\$19.70	\$13.99
3 Lemaire, Michele	Employee	Employee	\$32.53	\$43.64	\$45.82	\$19.70	\$13.99
4 Paz, Maria	Employee	Employee + Family	\$108.01	\$144.88	\$152.12	\$72.31	\$51.34
5 Ramirez, Laura	Employee	Employee + Family	\$108.01	\$144.88	\$152.12	\$72.31	\$51.34
6 Rogers, Susan	Employee	Employee	\$32.53	\$43.64	\$45.82	\$19.70	\$13.99
7 Saenz, Denise	Employee	Employee + Family	\$108.01	\$144.88	\$152.12	\$72.31	\$51.34

Total Monthly Premium	\$454.15	\$609.20	\$639.64	\$295.73	\$209.98
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GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Family Dental Plan Benefits—KPIC PPO and DeltaCare HMO

For more information about plan benefits and restrictions, refer to the plan highlight information at kp.org/smallbusinessplans/ca or your *Disclosure Form/ Evidence of Coverage*.

Benefits/Services	KPIC PPO			Delta Care HMO	
	KPIC PPO D 1500 In Network/Out of Network	KPIC PPO E 1000 In Network/Out of Network	KPIC PPO E 1500 In Network/Out of Network	DeltaCare HMO 10A	DeltaCare HMO 13B
Year deductible per member	\$25/\$50	\$25/\$50	\$25/\$50	None	None
Benefit maximum per member per year	\$1,500	\$1,000	\$1,500	None	None
Procedures not subject to deductible					
Exams	100%/50%	100%/50%	100%/50%	\$0	\$0
Bitewing X-rays	100%/50%	100%/50%	100%/50%	\$0	\$0
Other X-rays	80%/50%	80%/50%	80%/50%	\$0	\$0
Procedures subject to deductible					
Fillings	80%/50%	80%/50%	80%/50%	\$0	\$0
Crowns	80%/50% (stainless steel)	80%/50% (stainless steel)	80%/50% (stainless steel)	\$195 (porcelain)	\$355 (porcelain)
Prosthodontics	Not covered	50%/50%	50%/50%	\$100	\$285
Orthodontics (Children to age 19)	Not covered	Not covered	Not covered	\$1,700	\$1,900
Orthodontics (Adults)	Not covered	Not covered	Not covered	\$1,900	\$2,100



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Renewal Options: Family Dental Plans—KPIC Fee-for-Service (Premier)

Dental rates are based on the ZIP code of your business location.

Employee Name	Status	Tier	KPIC Fee-for-Service Plan C	KPIC Fee-for-Service Plan D	KPIC Fee-for-Service Plan E	KPIC Fee-for-Service Plan E with Ortho
1 Andrews, Johannis	Employee	Employee	\$26.86	\$37.98	\$53.21	\$54.32
2 Knight, Lori	Employee	Employee	\$26.86	\$37.98	\$53.21	\$54.32
3 Lemaire, Michele	Employee	Employee	\$26.86	\$37.98	\$53.21	\$54.32
4 Paz, Maria	Employee	Employee + Family	\$89.18	\$126.08	\$176.66	\$180.37
5 Ramirez, Laura	Employee	Employee + Family	\$89.18	\$126.08	\$176.66	\$180.37
6 Rogers, Susan	Employee	Employee	\$26.86	\$37.98	\$53.21	\$54.32
7 Saenz, Denise	Employee	Employee + Family	\$89.18	\$126.08	\$176.66	\$180.37
Total Monthly Premium			\$374.98	\$530.16	\$742.82	\$758.39



Family Dental Plan Benefits—KPIC Fee-for-Service (Premier)

For more information about plan benefits and restrictions, refer to the plan highlight information at kp.org/smallbusinessplans/ca or your *Disclosure Form/Evidence of Coverage*. Benefits payable will be based on the lesser of the usual, customary, and reasonable fees or the fees actually charged.

Benefits/Services	KPIC Fee-for-Service Plan C	KPIC Fee-for-Service Plan D	KPIC Fee-for-Service Plan E	KPIC Fee-for-Service Plan E with Ortho
Year deductible per member	None	\$25	\$25	\$25
Benefit maximum per member per year	\$500	\$1,000	\$1,000	\$1,000
Plan Pays				
Procedures not subject to deductible				
Exams	100%	100%	100%	100%
Bitewing X-rays	100%	100%	100%	100%
Other X-rays	80%	80%	80%	80%
Procedures subject to deductible				
Fillings	80%	80%	80%	80%
Crowns	80% (stainless steel)	80% (stainless steel)	80% (stainless steel)	80% (stainless steel)
Prostodontics	Not covered	Not covered	50%	50%
Orthodontics (Children to age 19)	Not covered	Not covered	Not covered	50%
Orthodontics (Adults)	Not covered	Not covered	Not covered	Not Covered



GORMAN ELEMENTARY SCHOOL DISTRICT
 Group ID: 296596
 Renewal Effective Date: March 01, 2020
 Medical Rate Area: 16
 Dental Rate Area: 2

Your Grandfathered (Nonmetal) Medical Plan Rates

\$20 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$345.00	\$963.00	\$947.00	\$1,340.00
30-39	\$381.00	\$1,035.00	\$973.00	\$1,481.00
40-49	\$491.00	\$1,130.00	\$933.00	\$1,491.00
50-54	\$639.00	\$1,329.00	\$1,054.00	\$1,699.00
55-59	\$808.00	\$1,697.00	\$1,208.00	\$1,952.00
60-64	\$996.00	\$1,892.00	\$1,332.00	\$2,209.00
65+	\$1,130.00	\$2,442.00	\$1,699.00	\$2,685.00

Understanding your grandfathered (nonmetal) plans

Grandfathered (nonmetal) plans are exempt from certain provisions of the Affordable Care Act (ACA), which has been in effect since 2010. To be grandfathered, a plan must have (among other requirements):

- Existed on March 23, 2010.
- Covered at least one member on each day since March 23, 2010.
- No changes made that would cause the plan to lose grandfathered status.

For details on grandfathered exemptions and status requirements, visit healthcare.gov.

Your grandfathered (nonmetal) plans

Plans listed with "RAF" and "Rate Area" on "Your Kaiser Permanente Portfolio" page are your grandfathered (nonmetal) plans. You may continue to offer these grandfathered (nonmetal) plans at renewal, provided the grandfathered status hasn't changed.

Do any of the following circumstances apply to one or more of your grandfathered (nonmetal) plans?

- Your group decreased the employer contribution rate by more than 5 percentage points below the rate on March 23, 2010, for any rate tier of this coverage (for example, employee only or family).
- Your group didn't have at least one person enrolled in this coverage on each day since March 23, 2010. (The enrolled person doesn't have to be the same one each day.)
- Your group transferred employees to the grandfathered coverage from the coverage in which they were enrolled on March 23, 2010, and both of the following are true:
 - Treating the new coverage as if it were a change to the old coverage would cause your group to lose its grandfathered status (for example, a cost-share increase that exceeds the grandfathering requirements).
 - There was no bona fide employment-based reason (other than changing the terms or cost of coverage) to transfer your employees into the new coverage.
- Your group entered into a merger, acquisition, or business restructuring with the principal purpose of covering new people under the grandfathered coverage.

If yes, you can no longer offer that grandfathered (nonmetal) plan at renewal. You may cancel the plan or replace it with a new metal plan. To cancel a grandfathered (nonmetal) plan or add a new metal plan, please complete and return the enclosed "2019 renewal changes" form.

If no, there's nothing you need to do. Please consult your broker or Kaiser Permanente representative if you need help. For service instructions, call our Small Business Services Customer Connection Team at 800-790-4661, option 3.



2020 Renewal Changes

If you're not making any changes, you don't need to submit this form.

To avoid processing delays, be sure to sign and submit all sections (1-10) of this form by the 1st of your renewal effective month to amt@kp.org, or fax it to 800-369-8010.

Plan changes received by 5 p.m. Pacific time (PT) on the 15th of the month will be applied retroactively to the 1st of your renewal month. Plan changes received after 5 p.m. PT on the 15th of the month will be effective on the 1st of the following month.

1. CANCEL PLANS

If you don't want to offer any of these plan(s) at your renewal, check the box next to the plan name.

Cancel medical plan(s)

Cancel Chiro/Acu Rider

\$20 Copayment Plan (Grandfathered)

Not offered

CONFIRM CHANGES BY SIGNING HERE

Sign each page and return. Please correct or supply signer, phone, and email as appropriate.
I affirm that I have authority to contract with KFHP and KPIC on behalf of the group.

JOHANNIS ANDREWS

Authorized Company Signer

X
Signature

Phone number

Title (please print)

Date
jandrews@lws.lacoe.edu

Email address

Please sign and email all renewal change pages to amt@kp.org, or fax them to 800-369-8010.



2. ADD NEW MEDICAL PLANS

To add plans, check the box next to the plan name. Groups with 1 to 5 enrolled subscribers are eligible to offer up to 3 plans. Groups with 6 or more enrolled subscribers are eligible to offer 1 or more plans. Summary of Benefits and Coverage (SBC) documents for all our plans are available at kp.org/smallbusiness-sbc/ca.¹

HMO Plans

PPO Insurance Plans²

- Platinum 90 HMO 0/10 + Child Dental Alt
- Platinum 90 HMO 0/15 + Child Dental

- Gold 80 HMO 250/25 + Child Dental
- Gold 80 HMO 500/30 + Child Dental Alt
- Gold 80 HRA HMO 2250/35 + Child Dental

- Silver 70 HMO 1650/55 + Child Dental Alt
- Silver 70 HMO 1800/55 + Child Dental Alt
- Silver 70 HMO 2250/50 + Child Dental
- Silver 70 HDHP HMO 2500/20% + Child Dental

- Bronze 60 HMO 6300/65 + Child Dental
- Bronze 60 HDHP HMO 6900/0 + Child Dental

- Platinum 90 PPO 0/15 + Child Dental
- Gold 80 PPO 250/25 + Child Dental
- Silver 70 PPO 2250/50 + Child Dental
- Bronze 60 PPO 6300/65 + Child Dental

If you've selected an HDHP or HRA medical plan and you would like to pair it with an HSA or HRA administered through Kaiser Permanente, you must contact our Small Business Services Customer Connection Team at 800-790-4661, option 3, as additional documents are required and administration fees will apply.

If you selected the Gold 80 HRA HMO 2250/35 above, you must establish and fund an HRA for each enrolled employee. The allowable funding range is \$200 to \$500 per employee. If your group covers dependents, the allowable funding range per family is \$400 to \$1,000.

3. ADD INFERTILITY BENEFIT

The optional infertility benefit is available only to groups with 20 or more eligible employees where Kaiser Permanente is the sole carrier. If you select this benefit, it will be added to all the HMO plans you offer, and the cost will be included in the medical plan rate.

Add: Infertility benefit

CONFIRM CHANGES BY SIGNING HERE

Sign each page and return. Please correct or supply signer, phone, and email as appropriate.
 I affirm that I have authority to contract with KFHP and KPIC on behalf of the group.

JOHANNIS ANDREWS

 Authorized Company Signer

 Title (please print)

X _____
 Signature

 Date
 jandrews@lws.lacoe.edu

 Phone number

 Email address

Please sign and email all renewal change pages to amt@kp.org, or fax them to 800-369-8010.



4. **ADD FAMILY DENTAL PLAN (Optional)**

Select only 1 plan

- KPIC Fee-for-service (Premier)
 Plan C
 Plan D
 Plan E
 Plan E w/ Ortho⁴
 KPIC PPO
 PPO D 1500
 PPO E 1000
 PPO E 1500
 DeltaCare HMO
 10A HMO
 13B HMO

5. **ADD CHIROPRACTIC/ACUPUNCTURE BENEFIT**

The chiropractic/acupuncture benefit can only be added at renewal and is only available to employees enrolled in a grandfathered (nonmetal) HMO medical plan. If you add the chiropractic/acupuncture benefit, all eligible subscribers and dependents must participate. The benefit cannot be offered with any metal plan, or with any grandfathered (nonmetal) HSA-qualified deductible HMO plan.

Add: Chiropractic/acupuncture benefit for grandfathered (nonmetal) copay, deductible HMO, and deductible HMO with HRA plans

6. **CHANGE EMPLOYER PREMIUM CONTRIBUTION**

Company contribution for employee coverage

Your contribution to coverage can be a percentage or a fixed dollar amount. Your minimum contribution must be at least 50% of the "employee only" monthly premium for the lowest-priced Kaiser Permanente medical plan offered by you, the employer.

Percentage of the premium is based on the following (select 1 only):

- Lowest plan offered
 All plans offered
 Specific plan offered: _____
 Employer contribution (50%–100%): _____ % per employee _____ % per dependent (optional)
 Employer contribution (fixed \$): _____ \$ per employee _____ \$ per dependent (optional)

CONFIRM CHANGES BY SIGNING HERE

Sign each page and return. Please correct or supply signer, phone, and email as appropriate.
 I affirm that I have authority to contract with KFHP and KPIC on behalf of the group.

JOHANNIS ANDREWS

 Authorized Company Signer

 Title (please print)

X _____
 Signature

 Date
 jandrews@lws.lacoe.edu

 Phone number

 Email address

Please sign and email all renewal change pages to amt@kp.org, or fax them to 800-369-8010.



7. CHANGE ERISA STATUS*

Our records indicate that your group is not subject to ERISA
 If your ERISA status has changed, please indicate the new status below:

- Subject to ERISA Not subject to ERISA

If you return this form without checking a box, we will assume you are not changing your ERISA status, and we will retain your group health plan's status as it is currently listed in our records.

8. UNDERWRITING STATEMENT

The copay HMO plans, HSA-qualified high deductible health plans, deductible HMO plans, and the deductible HMO plans with HRA, are underwritten by Kaiser Foundation Health Plan, Inc. (KFHP). Kaiser Permanente Insurance Company (KPIC), a subsidiary of KFHP, underwrites the Preferred Provider Organization (PPO) plans as well as the Premier and PPO dental plans. The chiropractic/acupuncture benefit is administered by American Specialty Health Plans of California, Inc.

9. FOOTNOTES

1. You can access Summary of Benefits and Coverage (SBC) documents to help you make an informed choice about your health plan(s). These documents summarize information about your health coverage options so you can easily compare Kaiser Permanente benefits and coverage with those of other carriers. Please provide your eligible employees with SBCs for your renewal plan(s) or for any plan(s) you change to in the future.
2. For your group to be eligible for the PPO plan, you must have Kaiser Permanente as your sole carrier. Groups may only have 1 PPO plan. If you add a PPO plan, you must complete and submit an Employer Application with this "renewal changes" form.
3. Dental plans are only available when purchased with a medical plan at group enrollment or group renewal. If you choose a dental plan, all eligible subscribers and dependents must participate. A medical PPO plan member living outside California is not eligible for the DeltaCare HMO plan.
4. At least 10 subscribers are needed to enroll the group in Dental Plan E with Orthodontics.
5. ERISA is a federal law that sets minimum standards for employee benefit plans established by private employers and employee organizations. Many group health plans are subject to ERISA, although government and church plans generally aren't. If you're unsure of your group health plan's ERISA status, we recommend that you consult with your financial or legal advisor before responding.

CONFIRM CHANGES BY SIGNING HERE

Sign each page and return. Please correct or supply signer, phone, and email as appropriate.
 I affirm that I have authority to contract with KFHP and KPIC on behalf of the group.

JOHANNIS ANDREWS

 Authorized Company Signer

 Title (please print)

X

 Signature

 Date
 jandrews@lws.lacoe.edu

 Phone number

 Email address

Please sign and email all renewal change pages to amt@kp.org, or fax them to 800-369-8010.



10. UPDATE RENEWAL HEALTH PLAN SELECTION FOR EACH EMPLOYEE (Census)

Please complete the "New Plan Selection" column for each employee listed below. Fill in the new plan name or "N/C" (no change) for each employee, then sign and submit all sections (1-10) to 800-369-8010, or email to amt@kp.org. To add a new employee or to terminate coverage for an employee, please see step 3 in "Your 2020 renewal checklist." Please add all COBRA members; they have not been printed on this page.

This census was taken approximately 120 days before your group renewal date.

RENEWAL PLAN SELECTION FOR EACH EMPLOYEE					
	Employee Name	Age	Tier	Renewal Plan	New Plan Selection
1.	Andrews, Johannis	61	Employee	\$20 Copayment Plan	
2.	Knight, Lori	56	Employee	\$20 Copayment Plan	
3.	Lemaire, Michele	45	Employee	\$20 Copayment Plan	
4.	Paz, Maria	46	Employee + Family	\$20 Copayment Plan	
5.	Ramirez, Laura	54	Employee + Family	\$20 Copayment Plan	
6.	Rogers, Susan	59	Employee	\$20 Copayment Plan	
7.	Saenz, Denise	42	Employee + Family	\$20 Copayment Plan	

CONFIRM CHANGES BY SIGNING HERE

Sign each page and return. Please correct or supply signer, phone, and email as appropriate.
 I affirm that I have authority to contract with KFHP and KPIC on behalf of the group.

JOHANNIS ANDREWS

Authorized Company Signer

X
Signature

Phone number

Title (please print)

Date

jandrews@lws.lacoe.edu

Email address

Please sign and email all renewal change pages to amt@kp.org, or fax them to 800-369-8010.

For effective dates January 1–June 1, 2020
 *Also available in Covered California and CaliforniaChoice

Small Business medical plan rates

Age on 2020 effective date	Platinum 90 HMO 0/10* + Child Dental Alt	Platinum 90 HMO 0/15* + Child Dental	Gold 80 HMO 250/25* + Child Dental	Gold 80 HMO 500/30* + Child Dental Alt	Gold 80 HRA HMO 2250/35 + Child Dental
0-14 ¹	\$303.70	\$300.65	\$267.04	\$264.36	\$239.24
15 ¹	\$329.45	\$326.13	\$289.53	\$286.61	\$259.26
16 ¹	\$339.29	\$335.88	\$298.13	\$295.12	\$266.92
17 ¹	\$349.14	\$345.62	\$306.73	\$303.63	\$274.57
18 ¹	\$359.74	\$356.11	\$315.99	\$312.80	\$282.82
19	\$356.36	\$352.61	\$311.27	\$307.97	\$277.07
20	\$367.34	\$363.48	\$320.86	\$317.46	\$285.61
21	\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
22	\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
23	\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
24	\$378.70	\$374.72	\$330.78	\$327.28	\$294.44
25	\$380.22	\$376.22	\$332.11	\$328.59	\$295.62
26	\$387.79	\$383.72	\$338.72	\$335.14	\$301.51
27	\$396.88	\$392.71	\$346.60	\$342.99	\$308.58
28	\$411.65	\$407.32	\$359.56	\$355.75	\$320.06
29	\$423.77	\$419.31	\$370.15	\$366.23	\$329.48
30	\$429.83	\$425.31	\$375.44	\$371.46	\$334.19
31	\$438.91	\$434.30	\$383.38	\$379.32	\$341.26
32	\$448.00	\$443.30	\$391.32	\$387.17	\$348.33
33	\$453.68	\$448.92	\$396.28	\$392.08	\$352.74
34	\$459.74	\$454.91	\$401.57	\$397.32	\$357.46
35	\$462.77	\$457.91	\$404.22	\$399.94	\$359.81
36	\$465.80	\$460.91	\$406.86	\$402.55	\$362.17
37	\$468.83	\$463.91	\$409.51	\$405.17	\$364.52
38	\$471.86	\$466.90	\$412.16	\$407.79	\$366.88
39	\$477.92	\$472.90	\$417.45	\$413.03	\$371.59
40	\$483.98	\$478.90	\$422.74	\$418.26	\$376.30
41	\$493.07	\$487.89	\$430.68	\$426.12	\$383.37
42	\$501.78	\$496.51	\$438.29	\$433.65	\$390.14
43	\$513.90	\$508.50	\$448.87	\$444.12	\$399.56
44	\$529.04	\$523.49	\$462.10	\$457.21	\$411.34
45	\$546.84	\$541.10	\$477.65	\$472.59	\$425.18
46	\$568.05	\$562.08	\$496.17	\$490.92	\$441.67
47	\$591.91	\$585.69	\$517.01	\$511.54	\$460.22
48	\$619.18	\$612.67	\$540.83	\$535.10	\$481.42
49	\$646.06	\$639.28	\$564.32	\$558.34	\$502.32
50	\$676.36	\$669.25	\$590.78	\$584.52	\$525.88
51	\$706.28	\$698.86	\$616.91	\$610.38	\$549.14
52	\$739.22	\$731.46	\$645.69	\$638.85	\$574.75
53	\$772.55	\$764.43	\$674.80	\$667.65	\$600.67
54	\$808.53	\$800.03	\$706.22	\$698.74	\$628.64
55	\$844.50	\$835.63	\$737.65	\$729.84	\$656.61
56	\$883.51	\$874.23	\$771.72	\$763.55	\$686.94
57	\$922.89	\$913.20	\$806.12	\$797.58	\$717.56
58	\$964.93	\$954.79	\$842.83	\$833.91	\$750.24
59	\$985.76	\$975.40	\$861.03	\$851.91	\$766.44
60	\$1,027.79	\$1,017.00	\$897.74	\$888.24	\$799.12
61	\$1,064.15	\$1,052.97	\$929.50	\$919.66	\$827.39
62	\$1,088.01	\$1,076.58	\$950.34	\$940.28	\$845.94
63	\$1,117.92	\$1,106.18	\$976.47	\$966.13	\$869.20
64+	\$1,136.10	\$1,124.16	\$992.34	\$981.84	\$883.32

¹HMO 0-14, 15, 16, 17, 18 age rates include the cost of \$13.99 for child dental coverage.

For effective dates January 1–June 1, 2020
 *Also available in Covered California and CaliforniaChoice

Small Business medical plan rates

Age on 2020 effective date	Silver 70 HMO 1650/55* + Child Dental Alt	Silver 70 HMO 1800/55* + Child Dental Alt	Silver 70 HMO 2250/50* + Child Dental	Silver 70 HDHP HMO 2500/20%* + Child Dental	Bronze 60 HMO 6300/65* + Child Dental	Bronze 60 HDHP HMO 6900/0* + Child Dental
0-14 [†]	\$222.86	\$219.22	\$229.82	\$206.81	\$190.41	\$180.31
15 [†]	\$241.42	\$237.47	\$249.00	\$223.95	\$206.09	\$195.09
16 [†]	\$248.52	\$244.44	\$256.34	\$230.50	\$212.09	\$200.75
17 [†]	\$255.62	\$251.42	\$263.68	\$237.05	\$218.08	\$206.40
18 [†]	\$263.27	\$258.93	\$271.57	\$244.11	\$224.54	\$212.49
19	\$256.92	\$252.45	\$265.48	\$237.18	\$217.01	\$204.58
20	\$264.84	\$260.23	\$273.67	\$244.49	\$223.70	\$210.89
21	\$273.03	\$268.28	\$282.13	\$252.05	\$230.61	\$217.41
22	\$273.03	\$268.28	\$282.13	\$252.05	\$230.61	\$217.41
23	\$273.03	\$268.28	\$282.13	\$252.05	\$230.61	\$217.41
24	\$273.03	\$268.28	\$282.13	\$252.05	\$230.61	\$217.41
25	\$274.12	\$269.35	\$283.26	\$253.06	\$231.54	\$218.28
26	\$279.58	\$274.72	\$288.90	\$258.10	\$236.15	\$222.63
27	\$286.13	\$281.16	\$295.67	\$264.15	\$241.68	\$227.85
28	\$296.78	\$291.62	\$306.68	\$273.98	\$250.68	\$236.33
29	\$305.52	\$300.21	\$315.70	\$282.04	\$258.06	\$243.28
30	\$309.89	\$304.50	\$320.22	\$286.08	\$261.75	\$246.76
31	\$316.44	\$310.94	\$326.99	\$292.13	\$267.28	\$251.98
32	\$322.99	\$317.38	\$333.76	\$298.18	\$272.82	\$257.20
33	\$327.09	\$321.40	\$337.99	\$301.96	\$276.28	\$260.46
34	\$331.46	\$325.69	\$342.51	\$305.99	\$279.97	\$263.94
35	\$333.64	\$327.84	\$344.76	\$308.01	\$281.81	\$265.68
36	\$335.83	\$329.99	\$347.02	\$310.02	\$283.66	\$267.42
37	\$338.01	\$332.13	\$349.28	\$312.04	\$285.50	\$269.16
38	\$340.19	\$334.28	\$351.53	\$314.05	\$287.35	\$270.89
39	\$344.56	\$338.57	\$356.05	\$318.09	\$291.04	\$274.37
40	\$348.93	\$342.86	\$360.56	\$322.12	\$294.73	\$277.85
41	\$355.48	\$349.30	\$367.33	\$328.17	\$300.26	\$283.07
42	\$361.76	\$355.47	\$373.82	\$333.97	\$305.56	\$288.07
43	\$370.50	\$364.06	\$382.85	\$342.03	\$312.94	\$295.03
44	\$381.42	\$374.79	\$394.14	\$352.11	\$322.17	\$303.72
45	\$394.25	\$387.40	\$407.40	\$363.96	\$333.01	\$313.94
46	\$409.54	\$402.42	\$423.20	\$378.08	\$345.92	\$326.12
47	\$426.74	\$419.32	\$440.97	\$393.96	\$360.45	\$339.81
48	\$446.40	\$438.64	\$461.28	\$412.10	\$377.05	\$355.47
49	\$465.79	\$457.69	\$481.31	\$430.00	\$393.43	\$370.90
50	\$487.63	\$479.15	\$503.88	\$450.16	\$411.88	\$388.30
51	\$509.20	\$500.34	\$526.17	\$470.07	\$430.10	\$405.47
52	\$532.95	\$523.68	\$550.72	\$492.00	\$450.16	\$424.39
53	\$556.98	\$547.29	\$575.55	\$514.18	\$470.45	\$443.52
54	\$582.92	\$572.78	\$602.35	\$538.13	\$492.36	\$464.17
55	\$608.85	\$598.27	\$629.15	\$562.07	\$514.27	\$484.83
56	\$636.98	\$625.90	\$658.21	\$588.03	\$538.02	\$507.22
57	\$665.37	\$653.80	\$687.55	\$614.25	\$562.01	\$529.83
58	\$695.68	\$683.58	\$718.87	\$642.22	\$587.61	\$553.96
59	\$710.69	\$698.33	\$734.39	\$656.09	\$600.29	\$565.92
60	\$741.00	\$728.11	\$765.70	\$684.07	\$625.89	\$590.05
61	\$767.21	\$753.87	\$792.79	\$708.26	\$648.03	\$610.93
62	\$784.41	\$770.77	\$810.56	\$724.14	\$662.56	\$624.62
63	\$805.98	\$791.96	\$832.85	\$744.05	\$680.77	\$641.80
64+	\$819.09	\$804.84	\$846.39	\$756.15	\$691.83	\$652.23

[†]HMO 0–14, 15, 16, 17, 18 age rates include the cost of \$13.99 for child dental coverage.

Small Business medical plan rates

Age on 2020 effective date	Platinum 90 PPO 0/15 + Child Dental	Gold 80 PPO 250/25 + Child Dental	Silver 70 PPO 2250/50 + Child Dental	Bronze 60 PPO 6300/65 + Child Dental
0-14 ¹	\$545.74	\$479.61	\$415.28	\$326.88
15 ¹	\$594.25	\$522.24	\$452.20	\$355.93
16 ¹	\$612.80	\$538.54	\$466.31	\$367.04
17 ¹	\$631.35	\$554.84	\$480.43	\$378.15
18 ¹	\$651.32	\$572.40	\$495.63	\$390.12
19	\$671.30	\$589.95	\$510.83	\$402.08
20	\$691.99	\$608.13	\$526.57	\$414.47
21	\$713.39	\$626.94	\$542.86	\$427.29
22	\$713.39	\$626.94	\$542.86	\$427.29
23	\$713.39	\$626.94	\$542.86	\$427.29
24	\$713.39	\$626.94	\$542.86	\$427.29
25	\$716.24	\$629.45	\$545.03	\$429.00
26	\$730.51	\$641.99	\$555.88	\$437.55
27	\$747.63	\$657.03	\$568.91	\$447.80
28	\$775.45	\$681.49	\$590.08	\$464.46
29	\$798.28	\$701.55	\$607.46	\$478.14
30	\$809.70	\$711.58	\$616.14	\$484.97
31	\$826.82	\$726.63	\$629.17	\$495.23
32	\$843.94	\$741.67	\$642.20	\$505.48
33	\$854.64	\$751.08	\$650.34	\$511.89
34	\$866.05	\$761.11	\$659.03	\$518.73
35	\$871.76	\$766.12	\$663.37	\$522.15
36	\$877.47	\$771.14	\$667.71	\$525.57
37	\$883.18	\$776.15	\$672.05	\$528.99
38	\$888.88	\$781.17	\$676.40	\$532.40
39	\$900.30	\$791.20	\$685.08	\$539.24
40	\$911.71	\$801.23	\$693.77	\$546.08
41	\$928.83	\$816.28	\$706.80	\$556.33
42	\$945.24	\$830.70	\$719.28	\$566.16
43	\$968.07	\$850.76	\$736.65	\$579.83
44	\$996.60	\$875.84	\$758.37	\$596.92
45	\$1,030.13	\$905.30	\$783.88	\$617.01
46	\$1,070.08	\$940.41	\$814.28	\$640.94
47	\$1,115.03	\$979.91	\$848.48	\$667.85
48	\$1,166.39	\$1,025.05	\$887.57	\$698.62
49	\$1,217.04	\$1,069.56	\$926.11	\$728.96
50	\$1,274.11	\$1,119.72	\$969.54	\$763.14
51	\$1,330.47	\$1,169.25	\$1,012.43	\$796.90
52	\$1,392.54	\$1,223.79	\$1,059.65	\$834.07
53	\$1,455.31	\$1,278.96	\$1,107.42	\$871.67
54	\$1,523.09	\$1,338.52	\$1,159.00	\$912.26
55	\$1,590.86	\$1,398.08	\$1,210.57	\$952.86
56	\$1,664.34	\$1,462.85	\$1,266.48	\$996.87
57	\$1,738.53	\$1,527.86	\$1,322.94	\$1,041.31
58	\$1,817.72	\$1,597.45	\$1,383.20	\$1,088.74
59	\$1,856.95	\$1,631.93	\$1,413.05	\$1,112.24
60	\$1,936.14	\$1,701.52	\$1,473.31	\$1,159.67
61	\$2,004.62	\$1,761.71	\$1,525.42	\$1,200.69
62	\$2,049.57	\$1,801.20	\$1,559.62	\$1,227.61
63	\$2,105.92	\$1,850.73	\$1,602.51	\$1,261.36
64+	\$2,140.17	\$1,880.82	\$1,628.58	\$1,281.87

¹PPO plans include the cost of child dental coverage in the overall rate.



Small Business Family Dental Plans and Chiropractic/Acupuncture Coverage Rates KERN COUNTY

KPIC Fee-for-Service (Premier)

Dental Plan C			
EE only	EE+S	EE+C	EE+S+C
\$26.86	\$55.07	\$56.41	\$89.18

Dental Plan D			
EE only	EE+S	EE+C	EE+S+C
\$37.98	\$77.85	\$79.75	\$126.08

Dental Plan E			
EE only	EE+S	EE+C	EE+S+C
\$53.21	\$109.08	\$111.75	\$176.66

Dental Plan E w/Ortho			
EE only	EE+S	EE+C	EE+S+C
\$54.32	\$111.37	\$114.08	\$180.37

KPIC PPO

PPO Dental Plan D 1500			
EE only	EE+S	EE+C	EE+S+C
\$32.53	\$66.69	\$68.32	\$108.01

PPO Dental Plan E 1000			
EE only	EE+S	EE+C	EE+S+C
\$43.64	\$89.46	\$91.65	\$144.88

PPO Dental Plan E 1500			
EE only	EE+S	EE+C	EE+S+C
\$45.82	\$93.93	\$96.23	\$152.12

DeltaCare HMO

DeltaCare 10A Dental Plan			
EE only	EE+S	EE+C	EE+S+C
\$19.70	\$37.63	\$52.41	\$72.31

DeltaCare 13B Dental Plan			
EE only	EE+S	EE+C	EE+S+C
\$13.99	\$26.72	\$37.21	\$51.34

Chiropractic/Acupuncture Coverage (grandfathered (nonmetal) plans only)

For Grandfathered copayment, deductible HMO, and deductible HMO with HRA plan			
EE only	EE+S	EE+C	EE+S+C
\$2.93	\$5.86	\$4.40	\$8.79

Employee/Dependent Codes	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse) EE+C = eligible employee plus child(ren) (subscriber and child[ren] without spouse) EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])
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For effective dates January 1–December 1, 2020

Small Business v1

2020 Renewal Notice Group Agreement Changes and Clarifications Effective January 1, 2020, through December 1, 2020

This *Group Agreement Changes and Clarifications Notice* ("Notice") includes a summary of the changes and clarifications that will be effective when your *Group Agreement* ("Agreement") is renewed in 2020, unless a different effective date is stated. Unless otherwise indicated, the changes and clarifications described here apply to each type of coverage that will be effective upon renewal of your *Agreement*. If you have not already received a *2020 Agreement*, please contact your broker or Kaiser Foundation Health Plan, Inc. ("Health Plan") account manager to obtain a copy. If your Group does not wish to renew your *Agreement*, your Group must give us advance written notice in accord with "Termination on Notice" in the "Termination of *Agreement*" section of your *Agreement*.

In certain circumstances, this Notice may also include changes that we made to your *Agreement* during the 2019 plan year through an amendment. This Notice does not include minor changes and clarifications that Health Plan is making to improve the readability of the *Agreement* or any changes we are making at your Group's request.

The "Calculating Monthly Premiums" section in your *Agreement* includes the Premiums applicable to your *Agreement*.

Note: Some capitalized terms in this Notice have special meaning. Please see the "Definitions" section of the applicable *Evidence of Coverage* ("EOC") document in your *Agreement* for terms you should know. In this Notice, "non-Medicare EOCs" means all EOCs other than "Kaiser Permanente Senior Advantage (HMO) when Medicare is secondary coverage" EOCs.

2020 Agreement

If you have not already received your *2020 Agreement* and your Group wants to make changes, please request them before your Anniversary Date. You will then receive your *2020 Agreement* shortly after you tell your Health Plan account manager about changes your Group wants to make. If you don't wish to make changes, you don't need to do anything to renew your *Agreement*. We will provide your Group with its *2020 Agreement* within 60 days after your Anniversary Date. If you would like to receive it sooner, please contact your Health Plan account manager.

We will provide the *2020 Agreement* to your Group online unless you have asked us to mail your Group a printed *2020 Agreement*. When we provide the *2020 Agreement* online, we will mail your Group a notice to let you know when the *2020 Agreement* is available to view and download.

Please keep in mind that unless your Group notifies us to make changes, your *2020 Agreement*, including the EOC documents, will reflect the same benefits and Cost Share information as your current *Agreement*, subject to the changes described in this *Renewal Notice*.

Plan-Specific Changes to Cost Share, Deductible, and Out-of-Pocket Maximum

These benefit changes were made to ensure that the plan complies with metal level (i.e. platinum, gold, silver, bronze) requirements. Unless otherwise specified, the Services listed are not subject to any deductible. This summary does not include all the benefit changes to your plan for next year. To see specific information on the benefits for your plan, please visit kp.org/plandocuments.

Bronze 60 HDHP HMO 6900/0 + Child Dental Plan - previously called the Bronze 60 HDHP HMO 6000/40% + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual medical deductible (individual/family)	\$6,000/\$12,000	\$6,900/\$13,800
Annual out-of-pocket maximum (individual/family)	\$6,650/\$13,300	\$6,900/\$13,800
Primary care office visit	40% after deductible	\$0 after deductible

Specialist care office visit	40% after deductible	\$0 after deductible
Most lab tests	40% after deductible	\$0 after deductible
Most X-rays	40% after deductible	\$0 after deductible
MRI, CT, PET imaging	40% after deductible	\$0 after deductible
Generic drugs	40% after deductible up to \$500 per prescription	\$0 after deductible
Preferred brand drugs	40% after deductible up to \$500 per prescription	\$0 after deductible
Specialty drugs	40% after deductible up to \$500 per prescription	\$0 after deductible
Outpatient surgery facility fee	40% after deductible	\$0 after deductible
Emergency Department visit	40% after deductible	\$0 after deductible
Ambulance services	40% after deductible	\$0 after deductible
Urgent care visit	40% after deductible	\$0 after deductible
Inpatient hospital care facility fee, per day	40% after deductible	\$0 after deductible
Mental health services, outpatient, per visit	40% after deductible	\$0 after deductible
Mental Health Other Outpatient Items/Services	40% after deductible	\$0 after deductible
Mental health services, inpatient, per admission	40% after deductible	\$0 after deductible
Substance abuse services, outpatient, per visit	40% after deductible	\$0 after deductible
Substance Abuse Other Outpatient Items/Services	40% after deductible	\$0 after deductible
Substance abuse services, inpatient, per admission	40% after deductible	\$0 after deductible
Maternity, delivery and inpatient well-baby care	40% after deductible	\$0 after deductible
Home health services	40% after deductible	\$0 after deductible
Rehabilitative services, per visit	40% after deductible	\$0 after deductible
Habilitation services, per visit	40% after deductible	\$0 after deductible
Skilled Nursing Facility	40% after deductible	\$0 after deductible
Durable medical equipment (Base)	40% after deductible	\$0 after deductible
Durable medical equipment (Supplemental)	Not covered	\$0 after deductible to \$2,000 annual max

Bronze 60 HMO 6300/65 + Child Dental Plan - previously called the Bronze 60 HMO 6300/75 + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual out-of-pocket maximum (individual/family)	\$7,550/\$15,100	\$7,800/\$15,600
Primary care office visit	\$75 (deductible applies after 1st 3 non-preventive visits)	\$65 (deductible applies after 1st 3 non-preventive visits)
Specialist care office visit	\$105 (deductible applies after 1st 3 non-preventive visits)	\$95 (deductible applies after 1st 3 non-preventive visits)
Most X-rays	100% up to OOP max applies	40% after deductible
MRI, CT, PET imaging	100% up to OOP max applies	40% after deductible
Generic drugs	100% to \$500 per prescription after pharmacy deductible	\$18 after pharmacy deductible
Preferred brand drugs	100% to \$500 per prescription after pharmacy deductible	40% after pharmacy deductible up to \$500 per prescription

Specialty drugs	100% to \$500 per prescription after pharmacy deductible	40% after pharmacy deductible up to \$500 per prescription
Outpatient surgery facility fee	100% up to OOP max applies	40% after deductible
Outpatient surgery physician/surgeon fee	100% up to OOP max applies	40% after deductible
Emergency Department visit	100% up to OOP max applies	40% after deductible
Ambulance services	100% up to OOP max applies	40% after deductible
Urgent care visit	\$75 (deductible applies after 1st 3 non-preventive visits)	\$65 (deductible applies after 1st 3 non-preventive visits)
Inpatient hospital care facility fee, per day	100% coinsurance up to OOP max applies	40% after deductible
Mental health services, outpatient, per visit	\$75 (deductible applies after 1st 3 non-preventive visits)	\$65 (deductible applies after 1st 3 non-preventive visits)
Mental Health Other Outpatient Items/Services	100% up to OOP max applies	40% after deductible up to \$65 after deductible
Mental health services, inpatient, per admission	100% up to OOP max applies	40% after deductible
Substance abuse services, outpatient, per visit	\$75 (deductible applies after 1st 3 non-preventive visits)	\$65 (deductible applies after 1st 3 non-preventive visits)
Substance Abuse Other Outpatient Items/Services	100% up to \$75 after deductible	40% up to \$65 after deductible
Substance abuse services, inpatient, per admission	100% up to OOP max applies	40% after deductible
Maternity, delivery and inpatient well-baby care	100% up to OOP max applies	40% after deductible
Home health services	100% up to OOP max applies	40% after deductible
Rehabilitative services, per visit	\$75	\$65
Habilitation services, per visit	\$75	\$65
Skilled Nursing Facility	100% coinsurance up to OOP max applies	40% after deductible
Durable medical equipment (Base)	100% after deductible	\$0 after deductible
Durable medical equipment (Supplemental)	Not covered	40% after deductible to \$2,000 annual max

Silver 70 HDHP HMO 2500/20% + Chld Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual out-of-pocket maximum (individual/family)	\$6,650/\$13,300	\$6,850/\$13,700
Durable medical equipment (Supplemental)	Not covered	20% after deductible to \$2,000 annual max

Silver 70 HMO 2250/50 + Child Dental w/o Contraceptives Plan - previously called the Silver 70 HMO + Child Dental w/o Contraceptives Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual medical deductible (individual/family)	\$2,000/\$4,000	\$2,250/\$4,500
Annual pharmacy deductible (individual/family)	\$200/\$500	\$300/\$600
Annual out-of-pocket maximum (individual/family)	\$7,550/\$15,100	\$7,800/\$15,600
Primary care office visit	\$45	\$50

Specialist care office visit	\$80	\$85
Most X-rays	\$80	\$85
Generic drugs	\$15 after pharmacy deductible	\$17 after pharmacy deductible
Preferred brand drugs	\$55 after pharmacy deductible	\$65 after pharmacy deductible
Emergency Department visit	\$350	\$400 after deductible
Urgent care visit	\$45	\$50
Mental health services, outpatient, per visit	\$45	\$50
Substance abuse services, outpatient, per visit	\$45	\$50
Rehabilitative services, per visit	\$45	\$50
Habilitation services, per visit	\$45	\$50
Durable medical equipment (Supplemental)	Not covered	20% after deductible to \$2,000 annual max

Silver 70 HMO 2250/50 + Child Dental Plan - previously called the Silver 70 HMO + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual medical deductible (individual/family)	\$2,000/\$4,000	\$2,250/\$4,500
Annual pharmacy deductible (individual/family)	\$200/\$400	\$300/\$600
Annual out-of-pocket maximum (individual/family)	\$7,550/\$15,100	\$7,800/\$15,600
Primary care office visit	\$45	\$50
Specialist care office visit	\$80	\$85
Most X-rays	\$80	\$85
Generic drugs	\$15 after pharmacy deductible	\$17 after pharmacy deductible
Preferred brand drugs	\$55 after pharmacy deductible	\$65 after pharmacy deductible
Emergency Department visit	\$350	\$400 after deductible
Urgent care visit	\$45	\$50
Mental health services, outpatient, per visit	\$45	\$50
Substance abuse services, outpatient, per visit	\$45	\$50
Rehabilitative services, per visit	\$45	\$50
Habilitation services, per visit	\$45	\$50
Durable medical equipment (Supplemental)	Not covered	20% after deductible to \$2,000 annual max

Silver 70 HMO 1800/55 Alt INF + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual out-of-pocket maximum (individual/family)	\$7,550/\$15,100	\$7,800/\$15,600
Most lab tests	\$50 after deductible	\$25 after deductible
Generic drugs	\$30	\$20
Durable medical equipment (Supplemental)	Not covered	45% after deductible to \$2,000 annual max

Silver 70 HMO 1650/55 Alt INF + Child Dental Plan – previously called the Silver 70 HMO 1000/55 Alt INF + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual medical deductible (individual/family)	\$1,000/\$2,000	\$1,650/\$3,300
Annual pharmacy deductible (individual/family)	\$250/\$500	\$350/\$700
Annual out-of-pocket maximum (individual/family)	\$7,550/\$15,100	\$7,800/\$15,600
Specialist care office visit	\$75	\$80
Most lab test	\$50	\$25
Most X-rays	\$70	\$75 after deductible
Generic drugs	\$30	\$20
Outpatient surgery physician/surgeon fee	35% after deductible	40% after deductible
Emergency Department visit	35% after deductible	40% after deductible
Ambulance services	35% after deductible	40% after deductible
Inpatient hospital care facility	35%	40%
Mental health services, inpatient, per admission	35% after deductible	40% after deductible
Substance abuse services, inpatient, per admission	35% after deductible	40% after deductible
Maternity, delivery and inpatient well-baby care	35% after deductible	40% after deductible
Skilled Nursing Facility	35% after deductible	40% after deductible
Durable medical equipment (Base)	35%	40%
Durable medical equipment (Supplemental)	Not covered	40% after deductible to \$2,000 annual max

Gold 80 HRA HMO 2250/35 + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual pharmacy deductible (individual/family)	\$0	\$100/\$200
Annual out-of-pocket maximum (individual/family)	\$7,550/\$15,100	\$7,800/\$15,600
Preferred brand drugs	\$30	\$30 after pharmacy deductible
Specialty drugs	20%	20% after pharmacy deductible
Durable medical equipment (Supplemental)	Not covered	50% after deductible to \$2,000 annual max

Gold 80 HMO 250/25 + Child Dental Plan – previously called the Gold 80 HMO 0/30 + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual medical deductible (individual/family)	\$0	\$250/\$500
Annual out-of-pocket maximum (individual/family)	\$7,200/\$14,400	\$7,800/\$15,600
Primary care office visit	\$30	\$25
Specialist care office visit	\$55	\$50
Most lab test	\$35	\$25
Most X-rays	\$55	\$65

Preferred brand drugs	\$55	\$50
Emergency Department visit	\$325	\$250 after deductible
Ambulance services	\$250	\$250 after deductible
Urgent care visit	\$30	\$25
Inpatient hospital care facility fee, per day	\$600 per day up to 5 days	\$600 per day up to 5 days after deductible
Mental health services, outpatient, per visit	\$30	\$25
Mental health services, other outpatient items/services	\$30	\$25
Mental health services, inpatient, per admission	\$600 per day up to 5 days	\$600 per day up to 5 days after deductible
Substance abuse services, outpatient, per visit	\$30	\$25
Substance Abuse Other Outpatient Items/Services	\$30	\$25
Substance abuse services, inpatient, per admission	\$600 per day up to 5 days	\$600 per day up to 5 days after deductible
Maternity, delivery and inpatient well-baby care	\$600 per day up to 5 days	\$600 per day up to 5 days after deductible
Rehabilitative services, per visit	\$30	\$25
Habilitation services, per visit	\$30	\$25
Skilled Nursing Facility	\$300 per day up to 5 days	\$300 per day up to 5 days after deductible
Durable medical equipment (Supplemental)	Not covered	20% after deductible to \$2,000 annual max

Platinum 90 HMO 0/15 + Child Dental Plan

Benefits	2019 Cost Share	2020 Cost Share
Annual out-of-pocket maximum (individual/family)	\$3,350/\$6,700	\$4,500/\$9,000
Durable medical equipment (Supplemental)	Not covered	10% to \$2,000 annual max

Premiums

Please refer to the "Kaiser Permanente Health Plans Rate Sheet" and the "Kaiser Permanente Dental and Chiropractic Rate Sheet" for the premium rates effective upon renewal. The "Premiums" listed on the Renewal Rate Notification apply to your Group's 2020 Agreement.

Senior Advantage (Medicare Secondary Payer)

Members enrolled in a Kaiser Permanente Senior Advantage (HMO) when Medicare is secondary coverage EOC, are subject to the same Premiums as Members enrolled in the non-Medicare EOC in the same Enrollment Unit. Refer to the Enrollment Unit Chart that was included with your Agreement for a list of your Enrollment Units.

For your non-Medicare EOC Premiums please refer to the rate chart corresponding to the EOC's benefit plan in the Kaiser Permanente Health Plan Rate Sheet.

COBRA and Cal-COBRA billing charge

For each Subscriber for whom Health Plan bills directly for group continuation coverage under COBRA or Cal-COBRA, add a billing charge of \$2.00.

KAISER PERMANENTE INSURANCE COMPANY

One Kaiser Plaza
Oakland, CA 94612

Employers: Please provide a copy of this notice to all affected certificate holders

Summary of Benefit Changes for 2020 Small Group PPO Plans

Each year at contract renewal, we inform you about changes to the Kaiser Permanente Insurance Company (KPIC) health insurance benefits. The following is a summary of the benefit changes affecting your group's coverage under the Group Policy. Unless otherwise indicated, the changes summarized below will be effective upon your group's renewal date. Upon renewal, a new *Certificate of Insurance (COI)* will be issued to you. The new *COI* becomes part of your KPIC Group Policy and replaces and supersedes any previous certificate or rider that may have been issued to you and your covered employees.

This notice provides a listing of plan changes known at this time that will become effective upon your group's renewal date, unless a different date is indicated. Benefits may be subject to further changes for subsequently enacted state or federal legislation or regulations.

- I. In accordance with California requirements regarding coverage of Essential Health Benefits, the following changes have been made at the Participating Provider tier. In addition, changes at the Non-Participating Provider tier listed below have been made for plan design simplification and/or to maintain affordability.
 - a. **Out-of-Pocket (OOP) Maximum**
 - i. The OOP Maximum amount at the Participating Provider tier will now be \$4,500 for an individual and \$9,000 for a family, and \$9,000 for an individual and \$18,000 for a family at the Non-Participating Provider tier. Applies to: Platinum plans
 - ii. The OOP Maximum amount at the Participating Provider tier will now be \$7,800 for an individual and \$15,600 for a family, and \$15,600 for an individual and \$31,200 for a family at the Non-Participating Provider tier. Applies to: Gold, Silver and Bronze plans
 - b. **Plan Deductible**
 - i. An overall Plan Deductible will now be required at the Participating Provider tier of \$250 for an individual and \$500 for a family. Applies to: Gold plans
 - ii. The overall Plan Deductible at the Participating Provider tier will now be \$2,250 for an individual and \$4,500 for a family, and \$4,500 for an individual and \$9,000 for a family at the Non-Participating Provider tier. Applies to: Silver plans
 - c. **Provider Office Visits**
 - i. Primary Provider and Other Practitioner Office Visits at the Participating Provider tier will now require a \$25 copayment. Applies to: Gold plans

- ii. *Primary Provider and Other Practitioner Office Visits at the Participating Provider tier will now require a \$50 copayment. Applies to: Silver plans*
 - iii. *Primary Provider and Other Practitioner Office Visits received at the Participating Provider tier will now require a \$65 copayment after the Deductible. (The Deductible is waived for a combined first three office visits for: non-preventive provider office visits, urgent care visits, and Mental Health/Substance Use Disorder Treatment visits.) Applies to: Bronze plans*
- d. Specialty Care Physician Office Visits**
- i. *Specialty Care Physician Office Visits at the Participating Provider tier will now require a \$50 copayment. Applies to: Gold plans*
 - ii. *Specialty Care Physician Office Visits at the Participating Provider tier will now require a \$85 copayment. Applies to: Silver plans*
 - iii. *Specialty Care Physician Office Visits at the Participating Provider tier will now require a \$95 copayment after the Deductible. (The Deductible is waived for a combined first three office visits for: non-preventive provider office visits, urgent care visits, and Mental Health/Substance Use Disorder Treatment visits.) Applies to: Bronze plans*
- e. Urgent Care Services**
- i. *Urgent Care Services received at the Participating Provider tier will now require a \$25 copayment. Applies to: Gold plans*
 - ii. *Urgent Care Services received at the Participating Provider tier will now require a \$50 copayment. Applies to: Silver plans*
 - iii. *Urgent Care Services received at the Participating Provider tier will now require a \$65 copayment after the Deductible. (The Deductible is waived for a combined first three office visits for: non-preventive provider office visits, urgent care visits, and Mental Health/Substance Use Disorder Treatment visits.) Applies to: Bronze plans*
- f. Emergency Room Care or Services**
- i. *Emergency Room Care or Services received at the Participating Provider tier or the Non-Participating Provider tier will now require a \$250 copayment after the Deductible. Applies to: Gold plans*
 - ii. *Emergency Room Care or Services received at the Participating Provider tier or the Non-Participating Provider tier will now require a \$400 copayment after the Deductible. Applies to: Silver plans*
 - iii. *Emergency Room Care or Services received at the Participating Provider tier or the Non-Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*
- g. Emergency or Non-Emergency Ambulance Services**
- i. *Emergency or non-emergency ambulance services received at the Participating Provider tier or the Non-Participating Provider tier will now require a \$250 copayment after the Deductible. Applies to: Gold plans*
 - ii. *Emergency or non-emergency ambulance services received at the Participating Provider tier or the Non-Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

h. Inpatient Care

- i. Inpatient Care received at the Participating Provider tier, including Hospital Care, Mental Health and Substance Use Disorder Care, and Multidisciplinary Rehabilitation Care will now require a 20% coinsurance after the Deductible. Applies to: Gold plans*
- ii. Inpatient Care received at the Participating Provider tier, including Hospital Care, Mental Health and Substance Use Disorder Care, and Multidisciplinary Rehabilitation Care will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

i. Skilled Nursing Facility Care

- i. Skilled Nursing Facility Care received at the Participating Provider tier will now require a 20% coinsurance after the Deductible. Applies to: Gold plans*
- ii. Skilled Nursing Facility Care received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

j. Home Health Care

- i. Home Health Care received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

k. Outpatient Surgery

- i. Outpatient Surgery received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

l. X-Ray and Diagnostic Testing

- i. X-Ray and Diagnostic Testing received at the Participating Provider tier will now require a \$65 copayment. Applies to: Gold plans*
- ii. X-Ray and Diagnostic Testing received at the Participating Provider tier will now require an \$85 copayment. Applies to: Silver plans*
- iii. X-Ray and Diagnostic Testing received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

m. Imaging (CT/PET scans and MRIs)

- i. Imaging (CT/PET scans and MRIs) received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

n. Laboratory Tests

- i. Laboratory Tests received at the Participating Provider tier will now require a \$25 copayment. Applies to: Gold plans*

o. Durable Medical Equipment

- i. Durable Medical Equipment received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Supplemental Durable Medical Equipment continues to be limited to a Benefit Maximum of \$2,000 per accumulation period, combined for Participating Provider and Non-Participating Provider tiers. Applies to: Bronze plans*

p. Prosthetics and Orthotics

- i. Prosthetics and Orthotics received at the Participating Provider tier will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*

- q. **Outpatient: Rehabilitation Services, Multidisciplinary Services, and Habilitative Therapy Services**
 - i. *Outpatient Rehabilitative, Multidisciplinary, and Habilitative Therapy Services received at the Participating Provider tier will now require a \$25 copayment. Applies to: Gold plans*
 - ii. *Outpatient Rehabilitative, Multidisciplinary, and Habilitative Therapy Services received at the Participating Provider tier will now require a \$50 copayment. Applies to: Silver plans*
 - iii. *Outpatient Rehabilitative, Multidisciplinary, and Habilitative Therapy Services received at the Participating Provider tier will now require a \$65 copayment. Applies to: Bronze plans*
- r. **Mental Health or Substance Use Disorder Treatment: Outpatient Office Visits**
 - i. *Mental Health or Substance Use Disorder Treatment Outpatient Office Visits received at the Participating Provider tier will now require a \$25 copayment. Applies to: Gold plans*
 - ii. *Mental Health or Substance Use Disorder Treatment Outpatient Office Visits received at the Participating Provider tier will now require a \$50 copayment. Applies to: Silver plans*
 - iii. *Mental Health or Substance Use Disorder Treatment Outpatient Office Visits received at the Participating Provider tier will now require a \$65 copayment after Deductible. (The Deductible is waived for a combined first three office visits for: non-preventive provider office visits, urgent care visits, and Mental Health/Substance Use Disorder Treatment visits.) Applies to: Bronze plans*
- s. **Mental Health or Substance Use Disorder Treatment Other Outpatient Items & Services**
 - i. *Mental Health or Substance Use Disorder Treatment Other Outpatient Other Items & Services received at the Participating Provider tier, including Behavioral Health Treatment Program for Pervasive Development Disorder or Autism, will now require a 20% coinsurance, not to exceed \$25. Applies to: Gold plans*
 - ii. *Mental Health or Substance Use Disorder Treatment Other Outpatient Other Items & Services received at the Participating Provider tier, including Behavioral Health Treatment Program for Pervasive Development Disorder or Autism, will now require a 40% coinsurance, not to exceed \$65 after the Deductible. Applies to: Bronze plans*
- t. **Pediatric Low Vision Exams, Follow-up Care and Vision Aids**
 - i. *Pediatric Low Vision Exams and Follow-up Care will now require a \$50 copayment. Applies to: Gold plans*
 - ii. *Pediatric Low Vision Exams and Follow-up Care will now require an \$85 copayment. Applies to: Silver plans*
 - iii. *Pediatric Low Vision Exams and Follow-up Care will now require a \$95 copayment after the Deductible. Applies to: Bronze plans*
 - iv. *Pediatric Low Vision Aids will now require a 40% coinsurance after the Deductible. Applies to: Bronze plans*
- u. **Other Outpatient Services**
 - v. *Other Outpatient Services received at the Participating Provider tier, including chemotherapy, radiation, infusion, allergy testing and treatment,*

dialysis, and fertility treatment (except invitro) will now require a 40% coinsurance after the Deductible. Fertility treatment continues to be limited to a maximum benefit of \$1,000 per accumulation period. Applies to: Bronze plans

v. Outpatient Prescription Drug Benefits

- i. Tier 2 Brand Name Drugs received at a Participating Pharmacy will now require a \$50 copayment. Applies to: Gold plans*
- ii. The Prescription Drug Deductible will now be \$300 for an individual and \$600 for a family. Applies to: Silver plans*
- iii. Tier 1 Generic Drugs received at a Participating Pharmacy will now require a \$17 copayment after the Prescription Drug Deductible. Applies to: Silver plans*
- iv. Tier 2 Brand Name Drugs received at a Participating Pharmacy will now require a \$65 copayment after the Prescription Drug Deductible. Applies to: Silver plans*
- v. Tier 1 Generic Drugs received at a Participating Pharmacy will now require a \$18 copayment after the Prescription Drug Deductible. Applies to: Bronze plans*
- vi. Tier 2 Brand Name Drugs received at a Participating Pharmacy will now require a 40% coinsurance, not to exceed \$500 per prescription after the Prescription Drug Deductible. Applies to: Bronze plans*
- vii. Tier 3 Specialty Drugs received at a Participating Pharmacy will now require a 40% coinsurance, not to exceed \$500 per prescription after the Prescription Drug Deductible. Applies to: Bronze plans*

II. Coverage of Preventive Services in accordance with Affordable Care Act (ACA) requirements

- a. The preventive care services that are covered at no charge and not subject to any Deductible when received at the Participating Provider tier have been expanded to include coverage for the following:**
 - i. Counseling intervention for pregnant and postpartum persons who are at increased risk of perinatal depression. Applies to: Platinum, Gold, Silver and Bronze plans*

Please refer to your *COI* for a detailed list of the preventive benefits that are covered based on the ACA guidelines.

THE ABOVE IS ONLY A SUMMARY OF THE BENEFIT CHANGES AFFECTING YOUR GROUP'S COVERAGE. PLEASE CONSULT THE GROUP POLICY FOR COMPLETE DETAILS REGARDING THE TERMS OF COVERAGE.

Gorman Joint School District
49847 Gorman School Road
P.O. Box 104
Gorman, CA 93243
(661) 248-6441 - FAX (661) 248-0604

BOARD OF TRUSTEES

MINUTES OF THE REGULAR MEETING

January 14, 2020

The President of the Board, Patricia Edwards, called the Regular Meeting of the Gorman Joint School District Board of Trustees to order at 3:00 P.M.

The Flag salute was held.

Members Present: Patricia Edwards, President
Steve Sonder, Clerk

Members Absent: Julie Ralphs, Member

Also Present: Johannis Andrews, Superintendent/Principal
Denise Saenz, Accounting/Data Processing Technician
Jean Cummings, Business Manager/Consultant

Others Present: Michele Downing, Mark Sanders, Teachers

6496 The Board approved the Agenda as presented for January 14, 2020.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6497 Adjourn to Closed Session at 3:01 P.M. to discuss personnel, employer/employee relations. (Govt. Code 54957, 54957.6):

1. Personnel (Govt. Code 54957)
2. Employer/Employee Relations (Govt. Code 54957.7)
3. Public Employee Discipline/Dismissal/Release

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6498 Reconvened to Regular Session at 3:31 P.M.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

No action was taken in closed session.

President, Patricia Edwards, asked for any comments from the Board.

President Edwards thanked the Board for having faith in her as President.

President Edwards thanked Jean Cummings and all involved in the audit for the good job they did.

Steve Sonder was also very appreciative of Jean Cummings and all the hard work she put into the audit.

Steve Sonder presented Patricia Edwards with a small gavel in honor of her becoming Board President.

President, Patricia Edwards, asked for any comments from the staff.

Superintendent Andrews stated that he will be discussing the budget with the Board over the next few months due to the loss of students at Gorman School.

Superintendent Andrews also stated that the water system was officially being changed over to the Golden Valley Municipal Water District as we sat in the meeting.

President, Patricia Edwards, asked for any comments from the public.

No comments

6499 The Board approved the Minutes of the Organizational Meeting of December 10, 2019.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6500 The Board approved Purchase Orders #19-20-148 through 19-20-186 of which \$24,807.24 was paid from the General Fund and \$8,738.25 from other funds.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6501 The Board approved the Commercial Warrant Register in the amount of \$47,916.16 from Fund 01.0, \$9,051.22 from Fund 13.0, \$1,976.58 from Fund 14.0 and \$700.00 from Fund 76.0.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6502 The Board approved Quarterly Report on Williams Uniform Complaints 2019-20 October 1 to December 31 (2nd QTR.).

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6503 The Board approved the P1 Report of School District Attendance 2019-20.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6504 The Board approved the 2018-19 Audit Report ended June 30, 2019 by Vavrinek, Trine, Day & Co., LLP.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6505 The Board approved Resolution # 10-19-20 Resolution to Authorize Pupil Transfers for the 2020-21 School Year and Determine the Number of Transfers to be Accepted.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6506 The Board approved standard business mileage reimbursement rate for 2020 decreasing to .575 cents per mile down from 58 cents, effective January 1, 2020 in accordance with the Internal Revenue Service (IRS) IR-2019-215, December 31, 2019.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6507 The Board approved the contract for Teleserv Legal/Consultant Services from Erikson Law Firm A.P.C. and the Gorman Joint School District, effective January 1, 2020-June 30, 2020.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6508 The Board approved a Permanent Easement and Right of Way to Golden Valley Municipal Water District (reference Resolution #03-19-20).

Motion made by Steve Sonder, Seconded by Julie Ralphs (via phone)
Vote: yes 2/no 0

6509 The Board approved the purchase of Social Studies Weekly for grades 2-3 in the amount of \$409.27.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6510 The Board approved Conference/Mileage Report #05-19-20.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6511 The Board approved Personnel Report #03-19-20.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6512 The Board approved Resolution #09-19-20 Board Absence of Julie Ralphs on December 10, 2019.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

6513 The Board adjourned the meeting at 3:40 P.M.

Motion made by Steve Sonder, Seconded by Patricia Edwards Vote: yes 2/no 0

Patricia Edwards, President

PURCHASE ORDER LOG

PO#	DATE	VENDOR	DESCRIPTION	ESTIMATED AMOUNT	AMOUNT PAID GENERAL	AMOUNT PAID OTHER	DATE PAID
19-20-187	1/17/20	Aeries Software	AeriesCon Spring 2020 Reg for Denise Saenz	\$575.00	\$ 575.00		1/23/20
188		SoCalGas	Gas Service for Rental 12/26/19-1/27/20	\$64.26			
189	1/17/20	Revolution Foods	Food Service 12/19	\$3,480.00			
190	1/17/20	Ready Refresh by Nestle	Drinking Water Service & Supplies 12/19	\$31.86		\$3,480.00	1/23/20
191	1/17/20	WexBank	Gas-Vans 12/9, 12/19	\$295.93	\$295.93		1/23/20
192	1/17/20	AKA Water Services	Bacteriological Sampling 10/19	\$75.00	\$75.00		1/23/20
193	1/17/20	AKA Water Services	Bacteriological Sampling 11/19, 12/19	\$150.00	\$150.00		1/23/20
194		Ready Refresh by Nestle	Drinking Water Service & Supplies 12/23/19-1/22/20	\$10.50			
195	1/17/20	Cecilia J Cummings, CPA	Business Manager Consultant Services 9/19	\$4,200.00	\$4,200.00		1/23/20
196	1/17/20	Arcadia Audiometric	Nursing Services 1/6/20	\$550.00	\$550.00		1/23/20
197	1/17/20	Lopez Landscaping	Yard Service 12/19	\$200.00	\$200.00		1/31/20
198	1/17/20	County of Los Angeles	Backflow Assembly Invoice	\$37.00	\$37.00		1/23/20
199		Quill	Custodial Supplies	\$73.97			
200	1/21/20	American Express	DS-Instr. Supplies, SEL Books, Dist Supplies, Amazon, JACCSBA Conf Hotel	\$2,307.08	\$2,307.08		1/23/20
201	1/21/20	CENIC	Reimbursement of BILG Circuit costs Oct-Dec 19	\$1,620.06	\$1,620.06		1/23/20
202	1/21/20	Thomson Reuters-West	CA Ed Code Books 2020	\$92.24	\$92.24		1/25/20
203	1/21/20	Atkinson, Andelson, Loya, Rudd	Legal Services 11/19	\$4,105.50	\$4,105.50		1/23/20
204	1/21/20	Quill	District Supplies-Envelopes & Pens	\$51.45	\$51.45		1/23/20
205	1/21/20	The Mountain Enterprise	Ad-Instr. Aide 11/8,15,22 Teacher 8/23,30	\$239.25	\$239.25		1/23/20
206	1/21/20	ACE Hardware	Maintenance Supplies	\$53.03	\$53.03		1/23/20
207	1/21/20	Tiny Eye	Speech Therapy Services	\$721.50	\$721.50		1/23/20
208		County of Los Angeles	Cafeteria Inspection 10/29/19	\$197.00			
209	1/21/20	Quill	Custodial Supplies	\$140.85	\$140.85		1/23/20
210	1/21/20	Quill	Office Supplies	\$194.39	\$194.39		1/23/20
211	1/29/20	Decker Equipment	Bathroom Stall Parts	\$67.17			
212	1/27/20	Quill	Link for Office Printers	\$509.37	\$509.37		1/29/20
213	1/27/20	SoCalGas	Gas Service for Rental	\$5.32	\$5.32		1/29/20
214	1/27/20	Lopez Landscaping	Emergency Clean-Up	\$750.00	\$750.00		1/31/20
215	1/27/20	Johannis Andrews	Reimbursement DOJ Fees	\$60.00			
216	1/27/20	Edie Bailley, LLP	Audit ending June 30, 2019	\$4,365.00	\$4,365.00		1/29/20
217	1/27/20	Elaine Salmon	Reimbursement for Holiday Program Supplies	\$149.24	\$149.24		1/29/20
218	1/27/20	SHI International Corp	Chromebooks, Carfs, Licenses, Recycling Fees	\$5,922.70	\$5,922.70		1/31/20
219	1/27/20	Santana's Pumping	Plumbing Services-Install 2" Service Line & Meter	\$16,957.07		\$16,957.07	1/31/20
220	1/27/20	Santana's Pumping	Plumbing Services-Install 2" Service Line	\$16,653.52		\$16,653.52	1/31/20
221	1/27/20	Quill	Link for Printer Room 122	\$171.58	\$171.58		1/29/20
222	1/27/20	Denise Saenz	Mileage 1/19	\$53.71	\$53.71		1/29/20

Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund Act	DOB/ DREV/ BSA	School Location /Dept	APD/ FY	Distribution Amt	Additional Amt	Warrant Amt
ACE HARDWARE - 0000009896	00000020080124	AD 64584,20000000234,1	GAX,64584,20000000234,1,0,1			01.0	00000,0	00000	81000	4380	0000000	7/2020	53.03	0.00	53.03
	00000020080124												Warrant Total:		53.03
AERIES SOFTWARE - 0000007504	00000020090125	AD 64584,20000000227,1	GAX,64584,20000000227,1,0,1			01.0	00000,0	11100	10000	5220	0000100	7/2020	575.00	0.00	575.00
	00000020090125												Warrant Total:		575.00
AKA WATER SERVICES INC. - 0000007839	00000020080125	AD 64584,20000000220,1	GAX,64584,20000000240,1,0,1			01.0	00000,0	00000	72000	5800	0000000	7/2020	150.00	0.00	150.00
	00000020080128	AD 64584,20000000220,1	GAX,64584,20000000224,1,0,1			01.0	00000,0	00000	72000	5800	0000000	7/2020	75.00	0.00	75.00
													Warrant Total:		225.00
AMERICAN BUSINESS MACHINES - 000008939	00000020058889	AD 64584,20000000223,1	GAX,64584,20000000203,1,0,1			01.0	00000,0	11100	10000	5610	0000000	7/2020	303.95	0.00	303.95
	00000020058889	AD 64584,20000000223,1	GAX,64584,20000000203,1,0,2			01.0	00000,0	00000	72000	5610	0000000	7/2020	101.31	0.00	101.31
													Warrant Total:		405.26
AMERICAN EXPRESS - 0000012205	00000020055850	AD 64584,20000000220,1	GAX,64584,20000000207,1,0,1			01.0	00000,0	00000	72000	5220	0000000	7/2020	287.38	0.00	287.38
		AD 64584,20000000220,1	GAX,64584,20000000207,1,0,2			01.0	00000,0	00000	72000	4350	0000000	7/2020	26.22	0.00	26.22
		AD 64584,20000000220,1	GAX,64584,20000000207,1,0,3			13.0	531000,0	00000	37000	4310	0000000	7/2020	28.31	0.00	28.31
		AD 64584,20000000220,1	GAX,64584,20000000207,1,0,4			01.0	00000,0	00000	72000	5880	0000000	7/2020	39.00	0.00	39.00
		AD 64584,20000000220,1	GAX,64584,20000000207,1,0,5			01.0	00000,0	00000	37000	4700	0000100	7/2020	107.30	0.00	107.30
													Warrant Total:		468.21

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AMERICAN EXPRESS - 090007220	00000020060127	AD 64584,20000000229,1	GAX,64584,20000000229,1,0,1			01.0	00000,0	11100	10000	4310	0000100	7/2020	893,01	0,00	893,01	
		AD 64584,20000000229,1	GAX,64584,20000000229,1,0,2			01.0	00000,0	11100	10000	4210	0000100	7/2020	134,57	0,00	134,57	
		AD 64584,20000000229,1	GAX,64584,20000000229,1,0,3			01.0	00000,0	11100	10000	5220	0000100	7/2020	1,242,50	0,00	1,242,50	
		AD 64584,20000000229,1	GAX,64584,20000000229,1,0,4			01.0	00000,0	00000	72000	5603	0000000	7/2020	39,00	0,00	39,00	
													Warrant Total:	2,307,08		
ARCADIA AUDIOMETRIC ASSOCIATES, INC. - 0000007424	00000020060128	AD 64584,20000000225,1	GAX,64584,20000000225,1,0,1			01.0	00000,0	11100	10000	5800	0000100	7/2020	550,00	0,00	550,00	
														Warrant Total:	550,00	
ATKINSON, ANDELSON, LOVA, RUUD & ROMO - 0000008795	00000020060130	AD 64584,20000000223,1	GAX,64584,20000000223,1,0,1			01.0	00000,0	00000	71000	5820	0000000	7/2020	1,581,58	0,00	1,581,58	
		AD 64584,20000000223,1	GAX,64584,20000000223,1,0,2			01.0	00000,0	00000	71000	5820	0000000	7/2020	1,546,75	0,00	1,546,75	
		AD 64584,20000000223,1	GAX,64584,20000000223,1,0,1			01.0	00000,0	00000	71000	5820	0000000	7/2020	4,105,00	0,00	4,105,00	
													Warrant Total:	7,233,31		
Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APD/ FY	Distribution Amt	Additional Amt	Warrant Amt	
						01.0	00000,0	00000	72000	5910	0000000	7/2020	298,89	0,00	298,89	
Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APD/ FY	Distribution Amt	Additional Amt	Warrant Amt	
						14.0	00000,0	00000	81000	5830	0000000	7/2020	1,158,58	0,00	1,158,58	
														Warrant Total:	1,158,58	

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Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APD/ FY	Distribution Amt	Additional Amt	Warrant Amt
CANYON FINANCIAL SERVICES, INC. - 0000007508	00000020086891	AD.64584.200000000221.1	GAX.64584.200000000205.1,0.1			01.0	00000.0	11100	10000	5610	00000000	72020	214.53	0.00	214.53
	00000020085891	AD.64584.200000000221.1	GAX.64584.200000000205.1,0.2			01.0	00000.0	00000	72000	5610	00000000	72020	71.51	0.00	71.51
	00000020083969	AD.64584.200000000225.1	GAX.64584.200000000239.1,0.1			01.0	00000.0	11100	10000	5610	00000000	72020	214.53	0.00	214.53
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.2			01.0	00000.0	00000	72000	5610	00000000	72020	71.51	0.00	71.51
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.1			01.0	00000.0	11100	10000	5610	00000000	72020	214.53	0.00	214.53
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.2			01.0	00000.0	00000	72000	5610	00000000	72020	71.51	0.00	71.51
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.2			01.0	00000.0	00000	72000	5610	00000000	72020	71.51	0.00	71.51
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.1			01.0	00000.0	11100	10000	5610	00000000	72020	214.53	0.00	214.53
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.2			01.0	00000.0	00000	72000	5610	00000000	72020	71.51	0.00	71.51
		AD.64584.200000000225.1	GAX.64584.200000000239.1,0.2			01.0	00000.0	00000	72000	5610	00000000	72020	71.51	0.00	71.51
													Warrant Total:	0.00	572.08
CECELIA J CUMMINGS CPA - 0000007621	00000020060131	AD.64584.200000000229.1	GAX.64584.200000000239.1,0.1			01.0	00000.0	00000	72000	5650	00000000	72020	3,150.00	0.00	3,150.00
		AD.64584.200000000229.1	GAX.64584.200000000239.1,0.2			01.0	65000.0	57700	21000	5650	00000000	72020	1,050.00	0.00	1,050.00
													Warrant Total:	0.00	4,200.00
CENIC - 0000012272	00000020060132	AD.64584.200000000240.1	GAX.64584.200000000254.1,0.1			01.0	00000.0	11100	10000	5600	00000000	72020	1,620.06	0.00	1,620.06
													Warrant Total:	0.00	1,620.06
COUNTY OF LOS ANGELES - 0000007492	00000020080133	AD.64584.200000000226.1	GAX.64584.200000000232.1,0.1			01.0	00000.0	00000	82000	5530	00000000	72020	37.00	0.00	37.00
													Warrant Total:	0.00	37.00

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DELTA DENIAL - 0000009847	00000020054170	AD 64584,20000000201,1	GAX,64584,20000000226,1,0,1			01.0	00000,0	11100	10000	3411	0000000	7/2020	108.56	0.00	108.56		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,2			01.0	65000,0	57700	11200	3411	0000000	7/2020	12.06	0.00	12.06		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,3			01.0	00000,0	11100	10000	3412	0000000	7/2020	32.62	0.00	32.62		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,4			01.0	14000,0	00000	36000	3412	0000000	7/2020	8.15	0.00	8.15		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,5			13.0	53100,0	00000	37000	3412	0000000	7/2020	12.08	0.00	12.08		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,6			01.0	00000,0	00000	72000	3412	0000000	7/2020	48.25	0.00	48.25		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,7			01.0	00000,0	11100	10000	3412	0000000	7/2020	60.31	0.00	60.31		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,8			01.0	00000,0	00000	27000	3411	0000000	7/2020	12.36	0.00	12.36		
		AD 64584,20000000201,1	GAX,64584,20000000226,1,0,9			01.0	00000,0	00000	71500	3411	0000000	7/2020	12.37	0.00	12.37		
															Warrant Total:		306.74
			00000020055851	AD 64584,20000000214,1	GAX,64584,20000000214,1,0,1			01.0	00000,0	11100	10000	3411	0000000	7/2020	158.02	0.00	158.02
				AD 64584,20000000214,1	GAX,64584,20000000214,1,0,2			01.0	65000,0	57700	11200	3411	0000000	7/2020	12.06	0.00	12.06
				AD 64584,20000000214,1	GAX,64584,20000000214,1,0,3			01.0	00000,0	11100	10000	3412	0000000	7/2020	(29.91)	0.00	(29.91)
				AD 64584,20000000214,1	GAX,64584,20000000214,1,0,4			01.0	14000,0	00000	36000	3412	0000000	7/2020	(7.48)	0.00	(7.48)
				AD 64584,20000000214,1	GAX,64584,20000000214,1,0,5			13.0	53100,0	00000	37000	3412	0000000	7/2020	12.06	0.00	12.06
		AD 64584,20000000214,1	GAX,64584,20000000214,1,0,6			01.0	00000,0	00000	72000	3412	0000000	7/2020	48.25	0.00	48.25		
		AD 64584,20000000214,1	GAX,64584,20000000214,1,0,7			01.0	00000,0	00000	71100	3412	0000000	7/2020	60.31	0.00	60.31		
		AD 64584,20000000214,1	GAX,64584,20000000214,1,0,8			01.0	00000,0	00000	27000	3411	0000000	7/2020	12.36	0.00	12.36		
		AD 64584,20000000214,1	GAX,64584,20000000214,1,0,9			01.0	00000,0	00000	71500	3411	0000000	7/2020	12.37	0.00	12.37		
													Warrant Total:		278.04		
DENISE SAENZ - 0000012199	00000020052555	AD 64584,20000000248,1	GAX,64584,20000000267,1,0,2			01.0	00000,0	11100	10000	5210	0000100	7/2020	53.71	0.00	53.71		

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													Warrant Total:		
ELINE SALMON -	00000020062555	AD 64584,20000000220,1	GAX,64584,20000000225,1,0,1			01.0	00000,0	00000	71910	5820	00000000	7/2020	4,365.00	0.00	4,365.00
													Warrant Total:		
ELINE SALMON -	00000020062557	AD 64584,20000000249,1	GAX,64584,20000000260,1,0,1			01.0	00000,0	11100	10000	4310	0000100	7/2020	149.24	0.00	149.24
													Warrant Total:		
ELIZABETH FIEDOREK -	000000200654171	AD 64584,20000000206,1	GAX,64584,20000000224,1,0,1			01.0	00000,0	11100	10000	5800	0000100	7/2020	1,230.00	0.00	1,230.00
													Warrant Total:		
GOLDEN VALLEY MUNICIPAL WATER DISTRICT -	000000200654172	AD 64584,200000000197,1	GAX,64584,20000000228,1,0,1			01.0	00000,0	00000	82000	5665	00000000	7/2020	961.55	0.00	961.55
													Warrant Total:		
HOUQUIN KIRFLIN HARCOIRI PUBLISHING CO. -	000000200654173	AD 64584,20000000189,1	GAX,64584,20000000227,1,0,1			01.0	11000,0	11100	10000	4110	0000100	7/2020	16,935.91	0.00	16,935.91
													Warrant Total:		

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INFINITY COMMUNICATION & CONSULTING - 0000009183	006000020055852	AD 64584,20000000219,1	GAX,64584,20000000211,1,0,1			01,0	00000,0	00000	72000	5850	0000000	7/2020	650,00	0,00	650,00
	006000020055852	AD 64584,20000000219,1	GAX,64584,20000000211,1,0,1			01,0	00000,0	00000	72000	5850	0000000	7/2020	650,00	0,00	650,00
I/V COMPUTER TECHNOLOGY - 0000008988	000000020055653	AD 64584,20000000216,1	GAX,64584,20000000212,1,0,1			01,0	00000,0	11100	10000	5900	0000100	7/2020	1,500,00	0,00	1,500,00
	000000020055853	AD 64584,20000000216,1	GAX,64584,20000000213,1,0,10			01,0	00000,0	00000	71500	3411	0000000	7/2020	<50,00	0,00	405,00
KAISER FOUNDATION HEALTH PLAN, INC. - 0000007631	000000020055654	AD 64584,20000000209,1	GAX,64584,20000000213,1,0,1			01,0	00000,0	11100	10000	3411	0000000	7/2020	2,068,40	0,00	2,068,40
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,10			01,0	00000,0	00000	71500	3411	0000000	7/2020	<50,00	0,00	405,00
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,2			01,0	65000,0	57700	11200	3411	0000000	7/2020	-47,80	0,00	147,80
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,3			01,0	00000,0	11100	10000	3412	0000000	7/2020	1,-41,50	0,00	1,141,80
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,4			01,0	14000,0	00000	38000	3412	0000000	7/2020	3,10,40	0,00	310,40
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,5			13,0	53100,0	00000	37000	3412	0000000	7/2020	272,80	0,00	272,80
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,6			01,0	00000,0	00000	72000	3412	0000000	7/2020	550,40	0,00	990,40
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,7			01,0	00000,0	00000	81000	3412	0000000	7/2020	1,263,00	0,00	1,263,00
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,8			76,0	00000,0	00000	00000	9517	0000000	7/2020	700,00	0,00	700,00
		AD 64584,20000000209,1	GAX,64584,20000000213,1,0,9			01,0	00000,0	00000	27000	3411	0000000	7/2020	405,00	0,00	405,00
													Warrant Total:	7,722,00	

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LOPEZ LANDSCAPING - 0000007713	00000020063970	AD 64584,20000000253,1	GAX,64584,20000000226,1,0,1			01.0	00000.0	00000	81000	5630	00000000	7/2020	200.00	0.00	200.00
		AD 64584,20000000253,1	GAX,64584,20000000226,1,0,1			01.0	00000.0	00000	81000	5630	00000000	7/2020	750.00	0.00	750.00
	00000020063970	AD 64584,20000000253,1	GAX,64584,20000000226,1,0,1										Warrant Total:		950.00
LORI MCH KNIGHT - 0000009826	00000020054174	AD 64584,20000000200,1	GAX,64584,20000000223,1,0,1			01.0	65000.0	57700	11100	5220	00000000	7/2020	134.79	0.00	134.79
	00000020054174	AD 64584,20000000200,1	GAX,64584,20000000223,1,0,1			01.0	65000.0	57700	11100	5220	00000000	7/2020	67.40	0.00	67.40
	00000020056855	AD 64584,20000000213,1	GAX,64584,20000000216,1,0,1			01.0	00000.0	11100	10000	5210	00001000	7/2020	189.71	0.00	189.71
	00000020056855	AD 64584,20000000213,1	GAX,64584,20000000216,1,0,2			01.0	00000.0	11100	10000	5210	00001000	7/2020	239.03	0.00	239.03
	00000020056855	AD 64584,20000000213,1	GAX,64584,20000000217,1,0,1			01.0	00000.0	11100	10000	5220	00001000	7/2020	239.03	0.00	239.03
	00000020056855	AD 64584,20000000213,1	GAX,64584,20000000217,1,0,1										Warrant Total:		496.14
MARY T. PIVETTI, M.ED - 0000009899	00000020054175	AD 64584,20000000202,1	GAX,64584,20000000223,1,0,1			01.0	00000.0	11100	10000	5900	00001000	7/2020	900.00	0.00	900.00
	00000020054175	AD 64584,20000000202,1	GAX,64584,20000000223,1,0,1			01.0	00000.0	11100	10000	5900	00001000	7/2020	900.00	0.00	900.00
	00000020055856	AD 64584,20000000217,1	GAX,64584,20000000202,1,0,1			01.0	00000.0	11100	10000	5900	00001000	7/2020	900.00	0.00	900.00
	00000020055856	AD 64584,20000000217,1	GAX,64584,20000000202,1,0,1										Warrant Total:		900.00
MOUNTAINSIDE DISPOSAL, INC., 0000007376	00000020055857	AD 64584,20000000208,1	GAX,64584,20000000206,1,0,1			01.0	00000.0	00000	82000	5580	00000000	7/2020	204.72	0.00	204.72
	00000020055857	AD 64584,20000000208,1	GAX,64584,20000000206,1,0,1			01.0	00000.0	00000	82000	5580	00000000	7/2020	204.72	0.00	204.72
	00000020060134	AD 64584,20000000228,1	GAX,64584,20000000234,1,0,1			01.0	00000.0	00000	82000	5590	00000000	7/2020	204.72	0.00	204.72

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Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APY/ FY	Distribution Amt	Additional Amt	Warrant Amt	
MOUNTAINSIDE DISPOSAL, INC. - 0800007576	00000020060134															204.72
	00000020062558	AD 64584,20000000245,1	GAX 64584,20000000282,1,0,1			01.0	00000,0	00000	82000	5560	00000000	7/2020	204.72	0.00	204.72	
	00000020062558															204.72
PRENTIS EDWARDS - 000000898	00000020054176	AD 64584,20000000203,1	GAX 64584,20000000228,1,0,1			01.0	00000,0	00000	77000	5940	00000000	7/2020	1,100.00	0.00	1,100.00	
	00000020054176															1,100.00
	00000020055858															
CULL - 000007787	00000020055858	AD 64584,20000000212,1	GAX 64584,20000000197,1,0,1			01.0	00000,0	11100	10000	4310	00001100	7/2020	170.52	0.00	170.52	
	00000020055858	AD 64584,20000000212,1	GAX 64584,20000000199,1,0,1			01.0	00000,0	11100	10000	4310	00001100	7/2020	76.63	0.00	76.63	
	00000020090135	AD 64584,20000000232,1	GAX 64584,20000000245,1,0,1			01.0	00000,0	00000	27000	4350	00000000	7/2020	194.39	0.00	194.39	
	00000020090135	AD 64584,20000000232,1	GAX 64584,20000000248,1,0,1			01.0	00000,0	00000	81100	4370	00000000	7/2020	140.85	0.00	140.85	
	00000020060135	AD 64584,20000000232,1	GAX 64584,20000000250,1,0,1			01.0	00000,0	11100	10000	4310	00001100	7/2020	51.45	0.00	51.45	
	00000020062559	AD 64584,20000000247,1	GAX 64584,20000000256,1,0,1			01.0	00000,0	11100	10000	4310	00001100	7/2020	509.37	0.00	509.37	
	00000020062559	AD 64584,20000000247,1	GAX 64584,20000000257,1,0,1			01.0	00000,0	11100	10000	4310	00001100	7/2020	171.50	0.00	171.50	
	00000020062559															680.95
	00000020060136	AD 64584,20000000235,1	GAX 64584,20000000243,1,0,1			01.0	00000,0	00000	82000	5530	00000000	7/2020	31.86	0.00	31.86	
	00000020060136															31.86
REVOLUTION FOODS, INC. - 680009568	00000020060137	AD 64584,20000000242,1	GAX 64584,20000000244,1,0,1			13.0	53100,0	00000	37000	4710	00000000	7/2020	3,480.00	0.00	3,480.00	
	00000020060137															3,480.00
														Warrant Total:		

Commercial Warrant Register
 01/01/2020 - 01/31/2020

Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub- Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APR/ FY	Distribution Amt	Additional Amt	Warrant Amt
SAVANNA'S PLUMBING- 0000072306	00000020056892	AD.64594.200000000224.1	GAX.64594.200000000218.1,0.1			14.0	000000.0	00000	61000	6530	00000000	7/2020	820.00	0.00	820.00
	00000020056892														
	00000020056971	AD.64594.200000000255.1	GAX.64594.200000000258.1,0.1			30.0	000000.0	00000	65000	6510	00000000	7/2020	16,553.52	0.00	16,553.52
	00000020056971	AD.64594.200000000255.1	GAX.64594.200000000258.1,0.1			30.0	000000.0	00000	65000	6510	00000000	7/2020	16,557.07	0.00	16,557.07
	00000020056971														
	00000020056971														
SHI INTERNATIONAL CORP - 0000007702	000000200683972	AD.64594.200000000252.1	GAX.64594.200000000256.1,0.1			01.0	000000.0	00000	27000	6510	0000100	7/2020	5,922.70	0.00	5,922.70
	000000200683972														
	000000200683972														
	00000020054177	AD.64594.200000000204.1	GAX.64594.200000000215.1,0.1			13.0	53100.0	00000	00000	9532	00000000	7/2020	41.08	0.00	41.08
	00000020054177	AD.64594.200000000204.1	GAX.64594.200000000215.1,0.2			01.0	140000.0	00000	00000	9532	00000000	7/2020	132.82	0.00	132.82
	00000020054177	AD.64594.200000000204.1	GAX.64594.200000000215.1,0.3			01.0	659000.0	00000	00000	9532	00000000	7/2020	120.80	0.00	120.80
	00000020054177	AD.64594.200000000204.1	GAX.64594.200000000215.1,0.4			01.0	000000.0	00000	00000	9532	00000000	7/2020	1,671.72	0.00	1,671.72
	00000020054177	AD.64594.200000000204.1	GAX.64594.200000000215.1,0.5			01.0	000000.0	00000	00000	9532	0000100	7/2020	22.56	0.00	22.56
	00000020054177														
	00000020054177														
	00000020054178	AD.64594.200000000199.1	GAX.64594.200000000221.1,0.1			01.0	000000.0	00000	82000	5520	00000000	7/2020	948.82	0.00	948.82
	00000020054178														
	00000020056960	AD.64594.200000000211.1	GAX.64594.200000000204.1,0.1			01.0	000000.0	00000	82000	5520	00000000	7/2020	376.92	0.00	376.92
	00000020056960														
	000000200562581	AD.64594.200000000246.1	GAX.64594.200000000284.1,0.1			01.0	000000.0	00000	82000	5520	00000005	7/2020	5.32	0.00	5.32
	000000200562581														
	000000200562581														
	00000020056138	AD.64594.200000000236.1	GAX.64594.200000000231.1,0.1			01.0	000000.0	00000	82000	5510	00000000	7/2020	640.77	0.00	640.77
	00000020056138														

Report ID: FIN-AP-0004
 Run Date: 02/06/2020
 Run Time: 12:19:48 PM

Commercial Warrant Register
 01/01/2020 - 01/31/2020

Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APD/ FY	Distribution Amt	Additional Amt	Warrant Amt
STORER TRANSPORTATION - 0000007477	00000020055859	AD 64584,2000000207,1	GAX,64584,2000000209,1,0,1			01.0	00000,0	00000	36000	5812	0000000	7/2020	7,442.85	0.00	7,442.85
	00000020055859	AD 64584,2000000207,1	GAX,64584,2000000210,1,0,1			01.0	00000,0	00000	36000	5812	0000000	7/2020	9,502.00	0.00	9,502.00
	00000020055859	AD 64584,2000000207,1	GAX,64584,2000000208,1,0,1			01.0	00000,0	00000	36000	5812	0000000	7/2020	7,442.85	0.00	7,442.85
TERESA LEGALTY - 0000009079	00000020054179	AD 64584,2000000205,1	GAX,64584,2000000222,1,0,1			01.0	00000,0	11100	10000	5800	0000100	7/2020	1,350.00	0.00	1,350.00
	00000020054179	AD 64584,2000000205,1	GAX,64584,2000000221,1,0,1			01.0	00000,0	11100	10000	5800	0000100	7/2020	1,350.00	0.00	1,350.00
	00000020055861	AD 64584,2000000218,1	GAX,64584,2000000201,1,0,1			01.0	00000,0	11100	10000	5800	0000100	7/2020	1,350.00	0.00	1,350.00
THE MOUNTAIN ENTERPRISE - 0000012314	00000020060139	AD 64584,2000000024,1	GAX,64584,20000000249,1,0,1			01.0	00000,0	00000	72000	5830	0000000	7/2020	239.25	0.00	239.25
	00000020060139	AD 64584,2000000024,1	GAX,64584,20000000252,1,0,1			01.0	00000,0	00000	72000	5830	0000000	7/2020	239.25	0.00	239.25
THOMSON REUTERS - WEST - 000009005	00000020061412	AD 64584,20000000243,1	GAX,64584,20000000252,1,0,1			01.0	00000,0	00000	72000	4210	0000000	7/2020	92.24	0.00	92.24
	00000020061412	AD 64584,20000000243,1	GAX,64584,20000000252,1,0,1			01.0	00000,0	00000	72000	4210	0000000	7/2020	92.24	0.00	92.24
Warrant Total:															

Report ID: FIN-AP-0004
 Run Date: 02/08/2020
 Run Time: 12:18:48 PM

Commercial Warrant Register
 01/01/2020 - 01/31/2020

Vendor	Warrant Number	Warrant Disbursement Doc	Payment Request Doc	Payment Request Doc	Vendor Invoice Number	Order Document	Fund /Sub-Fund	Resource /Project Yr	Goal/ Cat	Fund/ Act	DOB/ DREV/ BSA	School Location /Dept	APD/ FY	Distribution Amt	Additional Amt	Warrant Amt		
VAR TECHNOLOGY FINANCE - 000001281	000000020063973	AD 64584,20000000234,1	GAX 64584,20000000233,1,0,1				01,0	00000,0	11100	10000	6400	0000100	7/2020	315.39	0.00	815.39		
	000000020063973															815.39		
	000000020055662															780.00		
WEX BANK - 000007725	000000020055663	AD 64584,20000000210,1	GAX 64584,20000000226,1,0,1				01,0	00000,0	00000	81000	4360	0000000	7/2020	323.55	0.00	323.55		
	000000020055663															323.55		
	000000020060141	AD 64584,20000000231,1	GAX 64584,20000000242,1,0,1				01,0	00000,0	00000	81000	4360	0000000	7/2020	295.93	0.00	295.93		
	000000020060141															295.93		
Disbursement Doc Count: 59															Total:	138,934.15	0.00	138,934.15

Type of Disbursements	Daily	MTD	FYTD	Daily First Warrant	Daily Last Warrant	Disbursements
Automated Warrant Count	59	0	0	000000020054170	000000020063973	59
Manual Warrant Count	0	0	0			0
Fund	Warrant Amt					
01,0	98,708.87					
13,0	3,846.11					
14,0	1,976.59					
30,0	33,610.59					
76,0	700.00					

Report ID: FIN-AP-0004
Run Date: 02/06/2020
Run Time: 12:19:48 PM

Commercial Warrant Register
01/01/2020 - 01/31/2020

Renewal

ISAFE Enterprises LLC
 6189 El Camino Real
 Suite 201
 Carlsbad, CA 92009

Date	Renewal #
1/14/2020	IVC12024200

Bill To
Gorman School District Accounts Payable 49847 Gorman Sch Rd, POBox 104 Gorman, CA 93243

Ship To
Gorman School District Accounts Payable 49847 Gorman Sch Rd, POBox 104 Gorman, CA 93243

P.O. No.	Customer ID	Salesperson ID	Start Date	End Date
	GOR125	ISAFE		
Item	Description	Qty	Rate	Total
ISAFE-5000R-200-20-C	<p>i-SAFE Direct and DC4 School District Renewal</p> <p>389 K-12 digital learning lessons: 137 Lessons aligned to E-Rate required topics 252 Lessons for other e-safety topics Media-Rich Resources Printable Classroom Materials Digital Library of Webcasts Middle school assembly resources All content easily sourced by grade and topic Student Progress Monitored Robust Reporting and Analytics On-Demand Professional Development</p> <p>i-SAFE Direct Enterprise Solution (2020 – 2021)</p> <p>\$5.00 Per Student i-SAFE Direct AUP Customized AUP plan creation, dissemination, and reporting. i-SAFE Direct Permission Slip Simple prompt driven process to create permission slips for any activity. i-SAFE Direct Verifiable Parental Consent Allows schools to communicate with parents about commercial websites and apps. i-SAFE Direct Role Guide Turn-key solution enabling targeted communications and documents to educators. i-SAFE MyOk Digital Signature Platform for parents, students, and educators to sign all electronic documents.</p>	<p>Included (2020-2021)</p>	<p>390.00</p>	<p>390.00</p> <p>Included (2020-2021)</p>
EIN: 47-3413552		Total		\$390.00

**CIPA / E-Rate
Compliance**

ISAFE DC⁴ Digital Programming

ISAFE DC⁴ Digital Programming program provides 404 K-12 lesson plans that address digital citizenship and e-Safety topics including **identity theft, privacy & security, digital footprint, online identity, digital literacy, and creativity & copyright** in addition to CIPA/E-Rate topics of Appropriate Online Behavior, Social Networking and Cyber Bullying. Compliance technology tracks implementation, monitoring, reporting and storage required by E-Rate program.



The Challenge

Simple administrative oversight

Great educator experience

Standards based

District cost savings

CIPA requires that schools receiving reimbursements for telecommunications services through the E-Rate program must verify that they have educated every student on three topics: Appropriate Online Behavior, Social Networking, and Cyber Bullying.

But educators understand students need additional life and consumer skills to avoid identity theft and even pursue academics. The challenge for educators is finding a high quality, cohesive digital citizenship curriculum that is age-appropriate, aligned to standards, integrates with core subject matter, minimizes any reporting burden and stays current with the ever-advancing technologies.

The challenge for E-Rate administrators starts with being able to verify compliance with 100% of the educators, across multiple schools and all grades. In addition, they must brief administration with status reports as they protect funding, and eventually manage storage of documentation for 10 years.





RENEWAL QUOTE

IXL Learning
 777 Mariners Island Blvd., Suite 600
 San Mateo, CA 94404

QUOTE # 882186-0220
 DATE: FEBRUARY 4, 2020

TO:
 Denise Saenz
 Gorman Elementary School
 49847 Gorman School Road
 Gorman, CA 93243

COMMENTS OR SPECIAL INSTRUCTIONS

SALESPERSON	ACCOUNT #	RENEWAL PERIOD	QUOTE VALID UNTIL
Cassie Palisky	A13-882186	March 19, 2020 – March 19, 2021	March 19, 2020

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
1	IXL site license (Grades PK-8: 75 students) Subject: Math <i>Unlimited instructor accounts included</i>	\$938.00	\$938.00
SUBTOTAL			\$938.00
SALES TAX			–
SHIPPING & HANDLING			–
TOTAL DUE			\$938.00

Ordering instructions

We accept payment by purchase order, check, or credit card. School POs should be faxed to 650-372-4301 or e-mailed to orders@ixl.com. Please be sure to list the quote number on your payment or purchase order. For international accounts, we can accept wire transfers for an additional fee.



REQUIRES BOARD ACTION

Due: Mon. Mar. 16—return ballot in enclosed envelope

January 31, 2020

MEMORANDUM

To: All Board Presidents and Superintendents — CSBA Member Boards
From: Xilonin Cruz-Gonzalez, CSBA President
Re: 2020 Ballot for CSBA Delegate Assembly — **U.S. Postmark Deadline is Mon. March 16**

Enclosed is the ballot material for election to CSBA's Delegate Assembly from your region or subregion. It consists of: 1) the ballot (on red paper), the reverse side of which contains the names of ALL current members of the Delegate Assembly from your region or subregion; and 2) the required candidate biographical sketch form and, if submitted, a resume. In addition, provided is a copy of the ballot on white paper to include with your board agenda. **Only the ballot on red paper is to be completed and returned to CSBA. It must be postmarked by the U.S. Post Office on or before Monday, March 16, 2020. No exceptions.**

Your Board may vote for up to the number of vacancies in the region or subregion as indicated on the ballot. For example, if there are three vacancies, the Board may vote for up to three candidates. However, your Board may cast no more than one vote for any one candidate. (The ballot also contains a provision for write-in candidates; their name and district must be clearly printed in the space provided.)

The ballot must be signed by the Superintendent or Board Clerk and returned in the enclosed envelope; if the envelope is misplaced, you may use your district's stationery. Please write **DELEGATE ELECTION** prominently on the envelope along with the region or subregion number on the bottom left corner of the envelope (this number appears at the top of the ballot).

If there is a tie vote, a run-off election will be held. All re-elected and newly elected Delegates will serve two-year terms beginning April 1, 2020 – March 31, 2022. The next meeting of the Delegate Assembly takes place on Saturday, May 16 and Sunday, May 17 at the Hyatt Regency in Sacramento. The names of all Delegates will be available on CSBA's website no later than Wednesday, April 1. Please do not hesitate to contact CSBA's Executive Office at (800) 266-3382 should you have any questions.

Encs: Ballot on red paper and watermarked "copy" of ballot on white paper
List of all current Delegates on reverse side of ballot
Candidate(s)' required Biographical Sketch Forms and resumes, if provided
CSBA-addressed envelope to send back ballots

Delegate Assembly Biographical Sketch Form for 2020 election

DUE: Tuesday, January 7, 2020 – no late submissions accepted

Please complete, sign, and date this required biographical sketch form. An optional, ONE-page, single-sided, résumé may also be submitted. Please do not state “see résumé” and do not re-type this form. It is the candidate’s responsibility to confirm that all nomination materials have been received by the CSBA Executive Office, call 800.266.3382 or email at nominations@csba.org.

Your signature indicates your consent to have your name placed on the ballot and to serve as a Delegate, if elected.

Signature: Julie Bookman Date: 12/12/19

Name: Julie Bookman CSBA Region & subregion #: 22
 District or COE: Eastside Union School District Years on board: 1.5
 Profession: Retired Contact Number (please v Cell Home Bus.): 661 946-2467
 *Primary E-mail: jbookman@eastsideusd.org
 (*Communicatons from CSBA will be sent to primary email)
 Are you an Incumbent Delegate? Yes No | If yes, year you became Delegate: _____

Why are you interested in becoming a Delegate? Please describe the skills and experiences you would bring to the Delegate Assembly.

I am interested in becoming a delagete because I would like to be more aware of the what is going on in the legislature as far as education is concerned and how I can help influence funding and other issues that will benefit schools and districts in their mission of educating students.

Please describe your activities and involvement on your local board, community, and/or CSBA.

I have been a Eastside Union School District board member for 1 1/2 years. I have attended all of our board meetings during that time, and met regularly with the superintendent. I visit schools within our district and have attended Back to School Night, assemblies and an evening awards ceremony. I also attend AVSBA meetings and executive board meetings, and have been elected the Corresponding Secretary for AVSBA. I have attended the 2019 Legislative Action Day and 2019 CSBA Annual Education Conference.

What do you see as the biggest challenge facing governing boards and how can CSBA help address it?

I see the biggest challenge facing governing boards is accomplishing their goals and fulfilling legal requirements on the limited funding available. Governing boards need to be fiscally responsible while meeting the needs of their students, maintaining facilities, and providing textbooks and materials. CSBA can help by educating boards on issues and changing legislation, and continuing to fight for full and fair funding for education.

Delegate Assembly Biographical Sketch Form for 2020 election

DUE: Tuesday, January 7, 2020 – no late submissions accepted

Please complete, sign, and date this required biographical sketch form. An optional, ONE-page, single-sided, résumé may also be submitted. Please do not state "see résumé" and do not re-type this form. It is the candidate's responsibility to confirm that all nomination materials have been received by the CSBA Executive Office, call 800.266.3382 or email at nominations@csba.org.

Your signature indicates your consent to have your name placed on the ballot and to serve as a Delegate, if elected.

Signature: *Steven P DeMarzio* Date: 3 Jan 20.

Name: <u>Steven P DeMarzio</u>	CSBA Region & subregion #: <u>22</u>
District or COE: <u>Westside Union School District</u>	Years on board: <u>14+</u>
Profession: <u>Aerospace Engineer</u> Contact Number (please v <input checked="" type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Bus.): <u>661-965-6082</u>	
*Primary E-mail: <u>brutus350@verizon.net</u>	
(*Communications from CSBA will be sent to primary email)	
Are you an incumbent Delegate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, year you became Delegate: <u>2016</u>	

Why are you interested in becoming a Delegate? Please describe the skills and experiences you would bring to the Delegate Assembly.

Remaining a Delegate is a great way to achieve that goal as well as advance the the mission of CSBA. CSBA is and should continue to be the major driving force of advancing the education of students in the state of California. As a former fighter aviator in the USAF with 12 years of dedicated service and 23 years as an engineer in the aerospace industry, I can bring a fresh perspective and decisiveness to the Delegate Assembly. I also understand the necessity of molding and nurturing our youth into top-notch skilled professionals ready for the 21st century workforce.

Please describe your activities and involvement on your local board, community, and/or CSBA.

I have served three years as Board President, three years as Vice President, and three years as Clerk. I regularly attend school campuses and events and meet with our local state legislators. I am also quite active in our local school boards organization, Antelope Valley School Boards Association (AVSBA), which is comprised of 8 elementary districts, one high school district, two unified districts, and one community college. I have served four years as President as well as serving various other roles and responsibilities within that fine organization.

What do you see as the biggest challenge facing governing boards and how can CSBA help address it?

- I see several big challenges:
- 1) Maintaining a steady, consistent, and TRULY FULLY FUNDED revenue stream for ALL school districts in California in perpetuity.
 - 2) Keeping LCFF and LCAP local and in control locally. Sometimes, I feel the State legislature can't help but overreach into local affairs in its quest to "improve" the educational experience.
 - 3) Hold Governor Newsom accountable to fund education at the level that is required.

Delegate Assembly Biographical Sketch Form for 2020 election

DUE: Tuesday, January 7, 2020 – no late submissions accepted

Please complete, sign, and date this required biographical sketch form. An optional, ONE-page, single-sided, résumé may also be submitted. Please do not state "see résumé" and do not re-type this form. It is the candidate's responsibility to confirm that all nomination materials have been received by the CSBA Executive Office, call 800.266.3382 or email at nominations@csba.org.

Your signature indicates your consent to have your name placed on the ballot and to serve as a Delegate, if elected.

Signature: Stacy Dobbs Date: 01/04/2020

Name: <u>Stacy Dobbs</u>	CSBA Region & subregion #: <u>22</u>
District or COE: <u>Castaic Union School District</u>	Years on board: <u>4</u>
Profession: <u>Social Worker</u>	Contact Number (please v <input checked="" type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Bus.): <u>661-714-3383</u>
*Primary E-mail: <u>sdobbs@castaicusd.com</u>	
<small>(*Communications from CSBA will be sent to primary email)</small>	
Are you an incumbent Delegate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, year you became Delegate: <u>2018</u>	

Why are you interested in becoming a Delegate? Please describe the skills and experiences you would bring to the Delegate Assembly.

I am interested in continuing my service as a delegate to help ensure the interests of our local governing boards and communities are reflected in CSBA's vision and direction. I have developed positive working relationships with board members in our region through my delegate assembly service and participation in the SCV Trustees association. I have also developed relationships with local lawmakers and have participated in local and statewide advocacy efforts in support of public education. Additionally, I have strong organizational and communication skills, and am a team player.

Please describe your activities and involvement on your local board, community, and/or CSBA.

I was elected to the board of trustees in 2015 and have served as clerk and president. I am a member of the local trustees association, where I previously served as secretary and later co-vice president. I am actively involved in the Castaic and Santa Clarita communities, and have extensive volunteer experience with local charitable and religious organizations. I have completed CSBA's Masters In Governance training, Board President's training, and Good Beginnings workshops. I am currently in graduate school studying social work and interning for LA County DMH as a mental health counselor.

What do you see as the biggest challenge facing governing boards and how can CSBA help address it?

I believe the biggest challenge facing governing boards is inadequate funding. Declining enrollment, charter school encroachment, and the rising costs of special education and STRS/PERS contribution rates create budget challenges for governing boards. CSBA can help address these issues by continuing to lobby for full and fair funding and drive ongoing conversations and advocacy efforts to find appropriate solutions. CSBA can also continue to strengthen its grassroots strategy by hiring PACERS in all regions to help mobilize local school boards in community outreach and advocacy.

Experience

Bookkeeper, Larry Wood, CPA
Castaic, California

July 2015-Present

- Maintain records, client accounts, and complete reconciliations using QuickBooks
- Assist accountant in preparation of annual tax returns for businesses and individuals

MSW Intern Therapist

Department of Mental Health, San Fernando Child and Family Center
Single Mothers Outreach, Santa Clarita Valley

August 2019-Present
August 2018-May 2019

- Conduct assessment of clients and their families to evaluate strengths and needs
- Diagnose and engage clients in creating treatment plans for therapeutic services
- Provide targeted individual and group therapy for adults and children in crisis

Leadership

Elected Member Board of Trustees, Castaic Union School District
Castaic, California

November 2015-Present

- Provide oversight for K-8 public school district as a member of the governance team
- Collaborate to set direction, create board policy, and approve curriculum
- Ensure accountability by approving and monitoring \$20 million district budget
- Seek community input in setting goals through LCAP and strategic planning process
- Served as board president December 2018-December 2019
- Member of the Santa Clarita Valley Trustees Association since December 2015

California School Boards Association
Sacramento, California

December 2015-Present

- Elected to CSBA Delegate Assembly March 2018, representing Region 22 (SCV & AV)
- Participate in board training, workshops and three-day Annual Education Conference
- Engage in advocacy efforts for legislation to support students and public education

KHTS Annual Road Trip to Sacramento
Santa Clarita Valley/Sacramento, California

March 2017, 2018 & 2019

- Participated in annual trip to Sacramento to engage in advocacy efforts at state level
- Connected and collaborated with community leaders and business representatives

Education

Master's Degree, Social Work, California State University Northridge
Northridge, California

August 2018-Present
Graduation date: May 2020

Bachelor's Degree, Social Work, Brigham Young University
Provo, Utah

August 1993-April 1996



Delegate Assembly Biographical Sketch Form for 2020 election

DUE: Tuesday, January 7, 2020 – no late submissions accepted

Please complete, sign, and date this required biographical sketch form. An optional, ONE-page, single-sided, résumé may also be submitted. Please do not state “see résumé” and do not re-type this form. It is the candidate’s responsibility to confirm that all nomination materials have been received by the CSBA Executive Office, call 800.266.3382 or email at nominations@csba.org.

Your signature indicates your consent to have your name placed on the ballot and to serve as a Delegate, if elected.

Signature: Keith Giles Date: 12/16/19

Name: <u>Keith Giles</u>	CSBA Region & subregion #: <u>22</u>
District or COE: <u>Lancaster School District</u>	Years on board: <u>20</u>
Profession: <u>Manager</u>	Contact Number (please v <input checked="" type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Bus.): <u>661-609-9779</u>
*Primary E-mail: _____	
(*Communications from CSBA will be sent to primary email)	
Are you an incumbent Delegate? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, year you became Delegate: <u>2019</u>	

Why are you interested in becoming a Delegate? Please describe the skills and experiences you would bring to the Delegate Assembly.

I have served as prior Delegate and Director for many years.
I am very involved in serving my local community.
I am involved in many different ventures and bring many different point of view.

Please describe your activities and involvement on your local board, community, and/or CSBA.

Served on local board for 20 years.
Served on local School Board Association for 20 years.
Served as Reserve Deputy Sheriff for over 15 years.
Served as Soccer and T-Ball Coach.
Served in local church in various leadership roles for over 35 years.
Prior Delegate and Director

What do you see as the biggest challenge facing governing boards and how can CSBA help address it?

Funding and declining enrollment are persistent challenges. CSBA can continue to lobby lawmakers and train board members.

REQUIRES BOARD ACTION

This completed **ORIGINAL** Ballot must be **SIGNED** by the Superintendent or Board Clerk and returned in the enclosed envelope postmarked by the U.S. post office no later than **MONDAY, MARCH 16, 2020**. Only **ONE** Ballot per Board. Be sure to mark your vote "**X**" in the box.

A PARTIAL, UNSIGNED, PHOTOCOPIED, OR LATE BALLOT WILL NOT BE VALID.

OFFICIAL 2020 DELEGATE ASSEMBLY BALLOT
REGION 22
(Los Angeles County)

(Vote for no more than 3 candidates)

Delegates will serve two-year terms beginning April 1, 2020 – March 31, 2022

**denotes incumbent*

- Julie Bookman (Eastside Union SD)
- Steven DeMarzio (Westside Union ESD)*
- Stacy Dobbs (Castaic Union SD)*
- Keith Giles (Lancaster ESD)*

Provision for Write-in Candidate Name

School District

Signature of Superintendent or Board Clerk

Title

School District

Date of Board Action

See reverse side for a current list of all Delegates in your Region.

REGION 22 – 6 Delegates (6 elected)

Director: Nancy Smith (Palmdale SD)

Below are the current Delegates and their terms (as of January 31, 2020).

Los Angeles County: North Los Angeles

Steven DeMarzio (Westside Union ESD), term expires 2020

Stacy Dobbs (Castaic Union SD), term expires 2020

Keith Giles (Lancaster ESD), term expires 2020

Cherise Moore (William S. Hart Union HSD), term expires 2021

Steven M. Sturgeon (William S. Hart Union HSD), term expires 2021

Sharon Vega (Palmdale ESD), term expires 2021

County

North Los Angeles

Gorman Elementary School

School Accountability Report Card

Reported Using Data from the 2018-19 School Year

Published During 2019-20

By February 1 of each year, every school in California is required by state law to publish a School Accountability Report Card (SARC). The SARC contains information about the condition and performance of each California public school. Under the Local Control Funding Formula (LCFF) all local educational agencies (LEAs) are required to prepare a Local Control and Accountability Plan (LCAP), which describes how they intend to meet annual school-specific goals for all pupils, with specific activities to address state and local priorities. Additionally, data reported in an LCAP is to be consistent with data reported in the SARC.

- For more information about SARC requirements, see the California Department of Education (CDE) SARC web page at <https://www.cde.ca.gov/ta/ac/sa/>.
- For more information about the LCFF or LCAP, see the CDE LCFF web page at <https://www.cde.ca.gov/fg/aa/lc/>.
- For additional information about the school, parents/guardians and community members should contact the school principal or the district office.

DataQuest

DataQuest is an online data tool located on the CDE DataQuest web page at <https://dq.cde.ca.gov/dataquest/> that contains additional information about this school and comparisons of the school to the district and the county. Specifically, DataQuest is a dynamic system that provides reports for accountability (e.g., test data, enrollment, high school graduates, dropouts, course enrollments, staffing, and data regarding English learners).

Internet Access

Internet access is available at public libraries and other locations that are publicly accessible (e.g., the California State Library). Access to the Internet at libraries and public locations is generally provided on a first-come, first-served basis. Other use restrictions may include the hours of operation, the length of time that a workstation may be used (depending on availability), the types of software programs available on a workstation, and the ability to print documents.

About This School

School Contact Information (School Year 2019-20)

Entity	Contact Information
School Name	Gorman Elementary School
Street	49847 Gorman School Road
City, State, Zip	Gorman, CA 93243
Phone Number	661.248.6441
Principal	Johannis L. Andrews II
Email Address	j.andrews@gormanschool.com
Website	gorman.k12.ca.us
County-District-School (CDS) Code	19645846013940

Entity	Contact Information
District Name	Gorman Joint School District
Phone Number	661.248.6441
Superintendent	Johannis L. Andrews II
Email Address	j.andrews@gormanschool.com
Website	gorman.k12.ca.us

School Description and Mission Statement (School Year 2019-20)

The Gorman Joint School District is situated at the southern tip of the beautiful Tehachapi Mountains, 60 miles northwest of downtown Los Angeles. The rural setting encompasses 150 square miles of scenic rolling hills bordered on the north by the historic Tejon Ranch and on the south by thousands of acres of State Recreational Area.

The District serves the communities of Gorman, Frazier Park, Neenach, Lebec, and Lake of the Woods. Neighborhoods offer a wide range of residential opportunities including many ranch-style homes on acreages. Gorman experiences four distinct seasons with several light snowfalls each winter. Residents enjoy a slower and less hectic environment while being able to take advantage of the cultural opportunities in Los Angeles.

Gorman Joint School District has one K-8 school with 65 students and four teachers. The small size of Gorman Elementary School makes it possible to have an individualized nurturing environment in each classroom where the average class size is 24 students. Gorman Joint School District is designated by the State Department of Education as a District of Choice. As such many families from surrounding districts enroll their children at Gorman to take advantage of the small school environment.

Gorman Elementary School is committed to improved levels of academic performance. Our teachers are building on this success and to plan, implement, monitor, and evaluate a meaningful standards-based curriculum for all students. The goals, objectives, and activities have been identified and written based on needs expressed by students, parents, and staff input and are included in our Local Control and Accountability Plan (LCAP). These goals, objectives, and activities are established to improve and focus instruction at Gorman's Elementary School enabling students to meet grade level, district, and state standards. Our dedicated teachers are committed to high levels of teaching and learning and are involved in professional development training designed to strengthen their teaching skills.

The demographics of the District are as follows: 38% Hispanic, 48% White, 3% American Indian, 2% African American, 3% Asian, and 6% unknown. 20% of the student population is English Language Learners and 72% receive free or reduced-price meals.

The Gorman Joint School District is known for having a very supportive Board. The Board strongly supports the District's mission of "providing a challenging and rigorous educational experience for each of our students".

The mission of Gorman Elementary School is to provide a safe and caring climate in which all students will accept responsibility for their own actions, show respect for themselves and others, and become intentional learners in order to cooperate with the learning process. Staff, parents, and students will have high expectations and standards for teaching and learning.

Gorman's School Plan offers the on-going opportunity to plan, implement, monitor and evaluate a meaningful common core curriculum for all students. The goals, objectives, and activities have been identified and written based on needs expressed by students, parent, and staff input. These goals, objectives, and activities are established to improve and focus instruction at Gorman Elementary School enabling students to meet grade level, district and state standards.

Gorman School District Guiding Principles:

We believe students, parents, staff, and community have shared responsibility for:

1. Establishment of a professional culture built upon dedication, honesty, integrity, pride, perseverance, collaboration, teamwork, and mutual trust and respect.
2. Recognizing the diverse learning styles and individual needs of students and ensuring all students meet high learning standards.
3. Creating a learning environment reflecting our community's diversity that is safe, clean, supportive and responsive.
4. Protecting and preserving the short and long-term financial well-being of the District.

Student Enrollment by Grade Level (School Year 2018-19)

Grade Level	Number of Students
Kindergarten	13
Grade 1	7
Grade 2	6
Grade 3	8
Grade 4	9
Grade 5	9
Grade 6	13
Grade 7	9
Grade 8	8
Total Enrollment	82

Student Enrollment by Group (School Year 2018-19)

Student Group	Percent of Total Enrollment
American Indian or Alaska Native	2.4
Hispanic or Latino	35.4
White	56.1
Two or More Races	6.1
Socioeconomically Disadvantaged	69.5
English Learners	18.3
Students with Disabilities	14.6
Homeless	3.7

A. Conditions of Learning**State Priority: Basic**

The SARC provides the following information relevant to the State priority: Basic (Priority 1):

- Degree to which teachers are appropriately assigned and fully credentialed in the subject area and for the pupils they are teaching;
- Pupils have access to standards-aligned instructional materials; and
- School facilities are maintained in good repair

Teacher Credentials

Teachers	School 2017-18	School 2018-19	School 2019-20	District 2019-20
With Full Credential	4	4	3	3
Without Full Credential	0	0	1	1
Teaching Outside Subject Area of Competence (with full credential)	0	0	0	0

Teacher Misassignments and Vacant Teacher Positions

Indicator	2017-18	2018-19	2019-20
Misassignments of Teachers of English Learners	0	0	1
Total Teacher Misassignments*	0	0	1
Vacant Teacher Positions	0	0	0

Note: "Misassignments" refers to the number of positions filled by teachers who lack legal authorization to teach that grade level, subject area, student group, etc.

*Total Teacher Misassignments includes the number of Misassignments of Teachers of English Learners.

Quality, Currency, Availability of Textbooks and Instructional Materials (School Year 2019-20)

Year and month in which data were collected: 10/2016

All textbooks were selected from the most recent list of standards-based materials adopted by the California State Board of Education and are consistent with the content and cycles of the curriculum frameworks adopted by the SBE. Textbooks are chosen after careful review and piloting by teachers and then are approved by the Board of Trustees. There are textbooks/instructional materials for each student in each subject. All books are in excellent or good condition. Textbooks and instructional materials used in the district in the core subject areas of English-Language Arts, Mathematics, Science, and History-Social Science.

Subject	Textbooks and Other Instructional Materials/year of Adoption	From Most Recent Adoption?	Percent Students Lacking Own Assigned Copy
Reading/Language Arts	K-5 Houghton Mifflin Harcourt, Journeys (2016) 6-8 Houghton Mifflin Harcourt, Ca Collections (2016)	Yes	0
Mathematics	K-8 Houghton Mifflin Harcourt, California GO-Math (2015) Elementary and Middle School Math Curriculum	Yes	0
Science	Houghton Mifflin Harcourt 2020 science Dimensions TK-8 Science (2020), and HMH Science Dimension 2020 Science Kits.	Yes	0
History-Social Science	K-6 Houghton Mifflin, California Houghton Mifflin History Social Science (2007) 6-8 McDougal Littell California Middle School Social Studies Series (2006)	Yes	0

School Facility Conditions and Planned Improvements (Most Recent Year)

Gorman Elementary School places a strong emphasis on ensuring the safety of all students and staff members. Adult aides are employed to supervise students before school, at recess and lunch. Fire and earthquake drills are conducted monthly. Our campus is completely fenced, with one secure main entrance and two secondary entrances that are only open at specific times in the morning and afternoon. Staff is assigned supervision of the grounds and gates when our students arrive and leave school.

Gorman's custodial staff ensures the school facilities are in compliance with all federal and state and safety regulations. Each year a deep cleaning process occurs during the close of school, either during the summer or other extended breaks. In the event of a facility plant emergency, the principal notifies appropriate site and district personnel to resolve the emergency and safely secure or evacuate the students, based upon the site emergency preparedness plan.

Every effort is made to ensure students are monitored while on campus throughout the school day. Campus supervisors, teachers, site administrator, and school staff provide supervision for students before and during school. The playground is safe for all students. All visitors must sign in at the office and receive proper authorization to be on campus, and must display their passes at all times.

School Facility Good Repair Status (Most Recent Year)

Using the **most recently collected FIT data (or equivalent)**, provide the following:

- Determination of repair status for systems listed
- Description of any needed maintenance to ensure good repair
- The year and month in which the data were collected
- The overall rating

Year and month of the most recent FIT report: August 2019

System Inspected	Rating	Repair Needed and Action Taken or Planned
Systems: Gas Leaks, Mechanical/HVAC, Sewer	Good	Replacement of HVAC and lights was completed in 2017 and 2018.
Interior: Interior Surfaces	Fair	Repair and paint interior surfaces.
Cleanliness: Overall Cleanliness, Pest/ Vermin Infestation	Good	
Electrical: Electrical	Good	Electrical is repair or replacement as needed.
Restrooms/Fountains: Restrooms, Sinks/ Fountains	Fair	Drinking fountains are repaired as needed. Repairs to the drinking fountains were completed in 9/2019.
Safety: Fire Safety, Hazardous Materials	Good	
Structural: Structural Damage, Roofs	Fair	Concrete needs to be replaced and roof replacement/repair as needed. Roof replacement is needed to be done over the main building. Completion is scheduled for the 2019-2020 school year.
External: Playground/School Grounds, Windows/ Doors/Gates/Fences	Fair	Basketball and volleyball equipment needs to be repaired or replaced, during the 2019-2020 school year.
Overall Rating	Good	

B. Pupil Outcomes

State Priority: Pupil Achievement

The SARC provides the following information relevant to the State priority: Pupil Achievement (Priority 4):

- **Statewide assessments** (i.e., California Assessment of Student Performance and Progress [CAASPP] System, which includes the Smarter Balanced Summative Assessments for students in the general education population and the California Alternate Assessments [CAAs] for English language arts/literacy [ELA] and mathematics given in grades three through eight and grade eleven. Only eligible students may participate in the administration of the CAAs. CAAs items are aligned with alternate achievement standards, which are linked with the Common Core State Standards [CCSS] for students with the most significant cognitive disabilities); and
- The percentage of students who have successfully completed courses that satisfy the requirements for entrance to the University of California and the California State University, or career technical education sequences or programs of study.

CAASPP Test Results in ELA and Mathematics for All Students

Grades Three through Eight and Grade Eleven

Percentage of Students Meeting or Exceeding the State Standard

Subject	School 2017-18	School 2018-19	District 2017-18	District 2018-19	State 2017-18	State 2018-19
English Language Arts/Literacy (grades 3-8 and 11)	40	43	38	34	50	50
Mathematics (grades 3-8 and 11)	21	27	21	21	38	39

Note: Percentages are not calculated when the number of students tested is ten or less, either because the number of students in this category is too small for statistical accuracy or to protect student privacy.

Note: ELA and mathematics test results include the Smarter Balanced Summative Assessment and the CAA. The "Percent Met or Exceeded" is calculated by taking the total number of students who met or exceeded the standard on the Smarter Balanced Summative Assessment plus the total number of students who met the standard (i.e., achieved Level 3-Alternate) on the CAAs divided by the total number of students who participated in both assessments.

CAASPP Test Results in ELA by Student Group

Grades Three through Eight and Grade Eleven (School Year 2018-19)

Student Group	Total Enrollment	Number Tested	Percent Tested	Percent Not Tested	Percent Met or Exceeded
All Students	55	52	94.55	5.45	43.14
Male	23	23	100.00	0.00	34.78
Female	32	29	90.63	9.37	50.00
Black or African American					
American Indian or Alaska Native					
Filipino					
Hispanic or Latino	24	21	87.50	12.50	35.00
Native Hawaiian or Pacific Islander					
White	28	28	100.00	0.00	46.43

Student Group	Total Enrollment	Number Tested	Percent Tested	Percent Not Tested	Percent Met or Exceeded
Two or More Races	--	--	--	--	--
Socioeconomically Disadvantaged	41	39	95.12	4.88	44.74
English Learners	14	11	78.57	21.43	45.45
Students with Disabilities	--	--	--	--	--
Students Receiving Migrant Education Services					
Foster Youth					
Homeless	--	--	--	--	--

Note: ELA test results include the Smarter Balanced Summative Assessment and the CAA. The "Percent Met or Exceeded" is calculated by taking the total number of students who met or exceeded the standard on the Smarter Balanced Summative Assessment plus the total number of students who met the standard (i.e., achieved Level 3-Alternate) on the CAAs divided by the total number of students who participated in both assessments.

Note: Double dashes (--) appear in the table when the number of students is ten or less, either because the number of students in this category is too small for statistical accuracy or to protect student privacy.

Note: The number of students tested includes all students who participated in the test whether they received a score or not; however, the number of students tested is not the number that was used to calculate the achievement level percentages. The achievement level percentages are calculated using only students who received scores.

CAASPP Test Results in Mathematics by Student Group Grades Three through Eight and Grade Eleven (School Year 2018-19)

Student Group	Total Enrollment	Number Tested	Percent Tested	Percent Not Tested	Percent Met or Exceeded
All Students	55	52	94.55	5.45	26.92
Male	23	23	100.00	0.00	30.43
Female	32	29	90.63	9.37	24.14
Black or African American					
American Indian or Alaska Native					
Filipino					
Hispanic or Latino	24	21	87.50	12.50	23.81
Native Hawaiian or Pacific Islander					
White	28	28	100.00	0.00	28.57
Two or More Races	--	--	--	--	--
Socioeconomically Disadvantaged	41	39	95.12	4.88	28.21
English Learners	14	11	78.57	21.43	36.36
Students with Disabilities	--	--	--	--	--
Students Receiving Migrant Education Services					
Foster Youth					

Student Group	Total Enrollment	Number Tested	Percent Tested	Percent Not Tested	Percent Met or Exceeded
Homeless	--	--	--	--	--

Note: Mathematics test results include the Smarter Balanced Summative Assessment and the CAA. The "Percent Met or Exceeded" is calculated by taking the total number of students who met or exceeded the standard on the Smarter Balanced Summative Assessment plus the total number of students who met the standard (i.e., achieved Level 3-Alternate) on the CAAs divided by the total number of students who participated in both assessments.

Note: Double dashes (--) appear in the table when the number of students is ten or less, either because the number of students in this category is too small for statistical accuracy or to protect student privacy.

Note: The number of students tested includes all students who participated in the test whether they received a score or not; however, the number of students tested is not the number that was used to calculate the achievement level percentages. The achievement level percentages are calculated using only students who received scores.

**CAASPP Test Results in Science for All Students
Grades Five, Eight, and Ten
Percentage of Students Meeting or Exceeding the State Standard**

Subject	School 2017-18	School 2018-19	District 2017-18	District 2018-19	State 2017-18	State 2018-19
Science (grades 5, 8 and high school)	N/A	N/A	N/A	N/A	N/A	N/A

Note: Cells with N/A values do not require data.

Note: This is a placeholder for the California Science Test (CAST) which was administered operationally during the 2018-19 school year. However, these data are not available for inclusion in the 2018-19 SARC posting due February 1, 2020. These data will be included in the 2019-20 SARC posting due February 1, 2021.

State Priority: Other Pupil Outcomes

The SARC provides the following information relevant to the State priority: Other Pupil Outcomes (Priority 8):

- Pupil outcomes in the subject areas of physical education.

California Physical Fitness Test Results (School Year 2018-19)

Grade Level	Percentage of Students Meeting Four of Six Fitness Standards	Percentage of Students Meeting Five of Six Fitness Standards	Percentage of Students Meeting Six of Six Fitness Standards
5	29	15	0
7	25	13	25
9	NA	NA	NA

Note: Percentages are not calculated and double dashes (--) appear in the table when the number of students tested is ten or less, either because the number of students in this category is too small for statistical accuracy or to protect student privacy.

C. Engagement

State Priority: Parental Involvement

The SARC provides the following information relevant to the State priority: Parental Involvement (Priority 3):

- Efforts the school district makes to seek parent input in making decisions for the school district and each school site.

Opportunities for Parental Involvement (School Year 2019-20)

Gorman Elementary School has many opportunities for parents to become a more integral part of their children's education. Parents can be classroom volunteers and assist in the classroom on voluntary basis, or they can assist as a room parent, helping for special events or occasions. An active PTSSO also provides enrichment opportunities for the students and any parent is welcome to participate. Parents are encouraged to participate on the School Site Council, English Language Advisory Council (ELAC), and Community Advisory Council. These committees meet monthly to focus on issues of interest to parents. Parents are encouraged to visit their child's classroom. Visits to the classroom and with either teachers or other school staff members should be by appointment only. This will ensure that the persons or subjects that you want to see are available when you come. For the safety and protection of student learning time, classroom visits are limited to 20 minutes. All visitors to the school site must check in at the front office before entering the school grounds.

State Priority: School Climate

The SARC provides the following information relevant to the State priority: School Climate (Priority 6):

- Pupil suspension rates;
- Pupil expulsion rates; and
- Other local measures on the sense of safety.

Suspensions and Expulsions

Rate	School 2016-17	School 2017-18	School 2018-19	District 2016-17	District 2017-18	District 2018-19	State 2016-17	State 2017-18	State 2018-19
Suspensions	0.0	3.2	2.1	0.0	3.2	0.1	3.6	3.5	3.5
Expulsions	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.1

School Safety Plan (School Year 2019-20)

In compliance with Senate Bill 187 and Education Code. 35294.6 a comprehensive school safety plan, which was reviewed by the LCAP Advisory Committee, School Site Council, and approved by the Board on November 13, 2018, helps to provide a secure, peaceful and clean environment for Gorman's school community. Gorman Joint School District Disaster Preparedness Plan identifies procedures to follow during emergencies and natural disasters. Routine emergency preparedness drills are conducted monthly to ensure the safety and well being of students and staff in the event that there is a need for such an evacuation.

D. Other SARC Information

The information in this section is required to be in the SARC but is not included in the state priorities for LCFF.

Average Class Size and Class Size Distribution (Elementary)

Grade Level	2016-17	2016-17	2016-17	2016-17	2017-18	2017-18	2017-18	2017-18	2018-19	2018-19	2018-19	2018-19
	Average Class Size	# of Classes* Size 1-20	# of Classes* Size 21-32	# of Classes* Size 33+	Average Class Size	# of Classes* Size 1-20	# of Classes* Size 21-32	# of Classes* Size 33+	Average Class Size	# of Classes* Size 1-20	# of Classes* Size 21-32	# of Classes* Size 33+
K	18	1			17	1			20	1		
3	15	1			21		1		14	1		
5	19	1							18	1		
6	7	1										
Other**					19	1						

*Number of classes indicates how many classes fall into each size category (a range of total students per class).

** "Other" category is for multi-grade level classes.

Ratio of Academic Counselors to Pupils (School Year 2018-19)

Title	Ratio
Academic Counselors*	.0

*One Full Time Equivalent (FTE) equals one staff member working full time; one FTE could also represent two staff members who each work 50 percent of full time.

Student Support Services Staff (School Year 2018-19)

Title	Number of FTE* Assigned to School
Counselor (Academic, Social/Behavioral or Career Development)	
Library Media Teacher (Librarian)	
Library Media Services Staff (Paraprofessional)	
Psychologist	
Social Worker	
Nurse	
Speech/Language/Hearing Specialist	
Resource Specialist (non-teaching)	.5
Other	

*One Full Time Equivalent (FTE) equals one staff member working full time; one FTE could also represent two staff members who each work 50 percent of full time.

Expenditures Per Pupil and School Site Teacher Salaries (Fiscal Year 2017-18)

Level	Total Expenditures Per Pupil	Expenditures Per Pupil (Restricted)	Expenditures Per Pupil (Unrestricted)	Average Teacher Salary
School Site	8237	1739	6498	\$49,082
District	N/A	N/A	4759	49082
Percent Difference - School Site and District	N/A	N/A	30.9	0.0
State	N/A	N/A	\$7,506.64	\$64,941.00
Percent Difference - School Site and State	N/A	N/A	-14.4	-27.8

Note: Cells with N/A values do not require data.

The California Department of Education issued guidance to LEAs on August 1, 2018, regarding how to calculate school-level per-pupil expenditures that will be reported on 2018-19 report cards.

Types of Services Funded (Fiscal Year 2018-19)

Student Study and Child Study Teams assist students experiencing academic difficulty, those with special needs, assessing eligibility for placement in special classes and recommending specialized services as needed. Special services and classes are offered for students with learning disabilities as well as other students with exceptional needs.

Students receive Supplemental Educational Services, additional academics instruction designed to increase the academic achievement of students that have not met State targets for increasing students achievement (adequate yearly progress) for three or more years. Before and after school tutoring for at-risk and EL students is funded through categorical programs. Students at program improvement schools also can apply for choice and supplemental services through NCLB requirements for program improvement schools.

Teacher and Administrative Salaries (Fiscal Year 2017-18)

Category	District Amount	State Average For Districts In Same Category
Beginning Teacher Salary	\$	\$45,252
Mid-Range Teacher Salary	\$	\$65,210
Highest Teacher Salary	\$	\$84,472
Average Principal Salary (Elementary)	\$	\$107,614
Average Principal Salary (Middle)	\$	\$112,242
Average Principal Salary (High)	\$	\$
Superintendent Salary	\$	\$124,686
Percent of Budget for Teacher Salaries	20%	31%
Percent of Budget for Administrative Salaries	11%	7%

For detailed information on salaries, see the CDE Certificated Salaries & Benefits web page at <https://www.cde.ca.gov/ds/fd/cs/>.

Professional Development (Most Recent Three Years)

Measure	2017-18	2018-19	2019-20
Number of school days dedicated to Staff Development and Continuous Improvement	15	26	26

The Gorman Joint School District provides professional development throughout the school year that trains and supports staff in the effective implementation of our adopted core including, but not limited to PBIS trainings, VAPA planning and implementation, Lesson Design and Delivery, Data Analysis, Leadership Training, Thinking Maps, Writing Instruction, Direct Instruction, Building Academic Vocabulary, Culturally Responsive Teaching and Learning, Integrating Technology into the Classroom, and Differentiation in Strategies for teaching EL, GATE, and at-risk students. High-quality, ongoing professional development opportunities are recognized as an important component in our work towards continuous improvement in student learning.

Teachers participate annually in four district-wide professional development meetings during which they are provided the opportunity to share best practices with colleagues. As we transition to the Common Core State Standards, the focus during the district meetings is how the key shifts in the Common Core State Standards in English Language Arts, math, ELD Standards will impact day-to-day teaching and learning.

Instructional staff meets monthly to share best practices related to areas of instructional focus and leadership for meaningful change in educational systems.

The District continues to focus on implementing rigorous standards of helping all students to achieve and implementing the new California Common Core State Standards. This year's goals are to build the capacity of teachers in the transition to implementation of Common Core State Standards (CCSS) through developing a common language and shared understanding of lesson design and utilizing revised ELD standards.

Trained grade level teachers in the planning and development of Instructional Units that align Common Core Standards for both ELA, Math, and Science.

Provide training in the alignment of current textbooks and related subject area materials for the use in unit planning for ELA, Math, and Science.

Develop a yearlong plan for instruction using grade level common core standards.

Develop three new Benchmark assessments that align with planned instruction for both ELA and Math for each grade level.

Patricia Edwards, President
Steve Sonder, Clerk
Julie Ralphs, Member

GORMAN JOINT SCHOOL DISTRICT

Johannis Andrews II
Superintendent/Principal

49847 Gorman School Road
P.O. Box 104
Gorman, CA 93243
(661) 248-6441 - FAX (661) 248-0604

RESOLUTION #12-19-20

DECLARATION OF NEED FOR FULLY QUALIFIED EDUCATORS

BACKGROUND:

In order to employ an individual on an emergency or provisional permit, the District must have a Declaration of Need on file with the Commission that is valid during the time the permit is valid. The Declaration of Need is the employer's proof to the Commission that there is a need to hire un-credentialed teachers.

PROGRAM/EDUCATIONAL IMPLICATION:

Approval of the Declaration of Need allows the District to hire teachers who have not completed their credential program. The District will hire teachers on Emergency or Provisional Permits only after exhausting all available alternatives.

PASSED AND ADOPTED this 11th day of February, 2020 by the Board of Trustees of the Gorman Joint School District in Gorman, California.

Patricia Edwards, President



State of California
 Commission on Teacher Credentialing
 Certification Division
 1900 Capitol Avenue
 Sacramento, CA 95811-4213

Email: credentials@ctc.ca.gov
 Website: www.ctc.ca.gov

DECLARATION OF NEED FOR FULLY QUALIFIED EDUCATORS

Original Declaration of Need for year: 2019-2020

Revised Declaration of Need for year: 2019-2020

FOR SERVICE IN A SCHOOL DISTRICT

Name of District: Gorman Joint School District District CDS Code: 64584

Name of County: Los Angeles County CDS Code: 19

By submitting this annual declaration, the district is certifying the following:

- A diligent search, as defined below, to recruit a fully prepared teacher for the assignment(s) was made
- If a suitable fully prepared teacher is not available to the school district, the district will make a reasonable effort to recruit based on the priority stated below

The governing board of the school district specified above adopted a declaration at a regularly scheduled public meeting held on 02 / 11 / 20 certifying that there is an insufficient number of certificated persons who meet the district's specified employment criteria for the position(s) listed on the attached form. The attached form was part of the agenda, and the declaration did NOT appear as part of a consent calendar.

► **Enclose a copy of the board agenda item**

With my signature below, I verify that the item was acted upon favorably by the board. The declaration shall remain in force until June 30, 2020.

Submitted by (Superintendent, Board Secretary, or Designee):

<u>Johannis L. Andrews II</u>		<u>Superintendent/Principal</u>
<small>Name</small>	<small>Signature</small>	<small>Title</small>
<u>661-248-0604</u>	<u>661-248-6441</u>	<u>February 05, 2020</u>
<small>Fax Number</small>	<small>Telephone Number</small>	<small>Date</small>
<u>P.O. Box 104, Gorman, CA 93243</u>		
<small>Mailing Address</small>		
<u>j.andrews@gormanschool.com</u>		
<small>Email Address</small>		

FOR SERVICE IN A COUNTY OFFICE OF EDUCATION, STATE AGENCY OR NONPUBLIC SCHOOL OR AGENCY

Name of County _____ County CDS Code _____

Name of State Agency _____

Name of NPS/NPA _____ County of Location _____

The Superintendent of the County Office of Education or the Director of the State Agency or the Director of the NPS/NPA specified above adopted a declaration on ___/___/___, at least 72 hours following his or her public announcement that such a declaration would be made, certifying that there is an insufficient number of certificated persons who meet the county's, agency's or school's specified employment criteria for the position(s) listed on the attached form.

The declaration shall remain in force until June 30, _____.

► **Enclose a copy of the public announcement**
Submitted by Superintendent, Director, or Designee:

Name	Signature	Title
Fax Number	Telephone Number	Date
Mailing Address		
EMail Address		

► *This declaration must be on file with the Commission on Teacher Credentialing before any emergency permits will be issued for service with the employing agency*

AREAS OF ANTICIPATED NEED FOR FULLY QUALIFIED EDUCATORS

Based on the previous year's actual needs and projections of enrollment, please indicate the number of emergency permits the employing agency estimates it will need in each of the identified areas during the valid period of this Declaration of Need for Fully Qualified Educators. This declaration shall be valid only for the type(s) and subjects(s) identified below.

This declaration must be revised by the employing agency when the total number of emergency permits applied for exceeds the estimate by ten percent. Board approval is required for a revision.

Type of Emergency Permit	Estimated Number Needed
CLAD/English Learner Authorization (applicant already holds teaching credential)	1
Bilingual Authorization (applicant already holds teaching credential)	_____
List target language(s) for bilingual authorization: _____	_____
Resource Specialist	_____
Teacher Librarian Services	_____

LIMITED ASSIGNMENT PERMITS

Limited Assignment Permits may only be issued to applicants holding a valid California teaching credential based on a baccalaureate degree and a professional preparation program including student teaching.

Based on the previous year's actual needs and projections of enrollment, please indicate the number of Limited Assignment Permits the employing agency estimates it will need in the following areas:

TYPE OF LIMITED ASSIGNMENT PERMIT	ESTIMATED NUMBER NEEDED
Multiple Subject	1
Single Subject	
Special Education	
TOTAL	

EFFORTS TO RECRUIT CERTIFIED PERSONNEL

The employing agency declares that it has implemented in policy and practices a process for conducting a diligent search that includes, but is not limited to, distributing job announcements, contacting college and university placement centers, advertising in local newspapers, exploring incentives included in the Teaching as a Priority Block Grant (refer to www.cde.ca.gov for details), participating in state and regional recruitment centers and participating in job fairs in California.

If a suitable fully prepared teacher is not available to the school district, the district made reasonable efforts to recruit an individual for the assignment, in the following order:

- A candidate who qualifies and agrees to participate in an approved internship program in the region of the school district
- An individual who is scheduled to complete initial preparation requirements within six months

EFFORTS TO CERTIFY, ASSIGN, AND DEVELOP FULLY QUALIFIED PERSONNEL

Has your agency established a District Intern program? Yes No

If no, explain. Teachers will complete internship program at one of the following Universities

Does your agency participate in a Commission-approved college or university internship program? Yes No

If yes, how many interns do you expect to have this year? 1

If yes, list each college or university with which you participate in an internship program.

University of La Verne, San Diego State University, Azusa Pacific University, University of Phoenix, Chapman University

If no, explain why you do not participate in an internship program.



President
Susan Summers
ssummers@palmdalesd.org

Past-Past President
Rebecca Cooksey
cookseyr@lancsd.org

President Elect
Laura Duran
L.duran@westside.k12.ca.us

Secretary
Irene Orloff
INOrloff@palmdalesd.org

Treasurer
Dr. Bev Marlin
BMartin@palmdalesd.org

Membership
Kim Porter
kporter@lancsd.org

Programs
Mike Davis
davismb@lancsd.org
Robert Wood
woodr@lancsd.org

Parliamentarian/ Historian
Rebecca Cooksey
cookseyr@lancsd.org
Kathy Wehunt
kmwehunt@palmdalesd.org

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David Denning
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Social Media/Website
Xluteh Santibanez
XSantibanez@palmdalesd.org

Communications
Gia Greaux
GFGreaux@palmdalesd.org

RACSAM
Joyce Mayberry
ranmay@verizon.net

ANTELOPE VALLEY REPRESENTATIVES:

Acton: Dr. Larry King
L.King@aadusd.k12.ca.us

AVUHSD – Teresa Howard
thoward@avhsd.org

EUSD – Dr. Joshua Lightle
J.Lightle@eastsideusd.org

HELUS – TBD

Keppel – Dr. Ruben Zepeda
rzepeda@keppel.k12.ca.us

LSD – Erle Robinson
Robinsone@lancsd.org

PSD – Kelly Jensen
kwjensen@palmdalesd.org

WUSD – Sandra Jones
k.knuzinga@westside.k12.ca.us

WSD – Ray King
rking@wilsona.k12.ca.us

January 17, 2020

Dear Superintendent Andrews,

It is that time of year for the local ACSA chapter to collect dues. Our rolls show one administrator from the Gorman Joint School District who are members of our chapter.

The local AV ACSA dues are \$25.00 per administrator for the 2019-2020 school year. The total amount for your school district local dues is \$25.00. Please make checks payable to AV ACSA.

The check can be sent to:

Laura Duran,
IDEA Academy @Cottonwood
Westside Union School District
2740 West Avenue P-8
Palmdale, CA 93551

Thank you for your continued support of the Association of California School Administrators.

Sincerely,

Laura Duran
ACSA Region 15
President Elect

**Small School Districts'
Association**

925 L Street, Suite
SACRAMENTO, CA
958144427
(916) 662-7213
assistant@ssda.org
www.ssda.org

BILL TO

Gorman Elementary School
District
49847 Gorman School
Road
P.O. Box 104
Gorman, CA 93243

INVOICE 17-02411

DATE 10/30/2019

DUE DATE 12/30/2019

DATE	ACTIVITY	QTY	RATE	AMOUNT
10/30/2019	Dues District Basic Membership District Membership Dues February 1, 2020 through January 31, 2021	1	350.00	350.00

TOTAL DUE

\$350.00

QUOTE

Facundo Landscaping

PO Box 933
 Lebec, CA, 93243

DATE: FEBRUARY 7, 2020

(818)849-2062

TO Gorman Elementary School
 49847 Gorman School Rd
 Gorman, CA, 93243
 (661)248-6441

DESCRIPTION	
One Time	
1.	Trim 6 trees and Remove Debris
2.	Remove 1 tree completely
TOTAL \$1,800	

Prepared by: Facundo Toribio

THANK YOU FOR YOUR BUSINESS!

GORMAN JOINT SCHOOL DISTRICT

PERSONNEL REPORT #07-19-20

February 11, 2020

Classified

New Hire

Substitute Aide
Employee #VM6681649
Effective January 8, 2020

AGREEMENT FOR PROFESSIONAL SERVICES

This Agreement is entered into between the Gorman Joint School District and Casey Stanford ("Contractor"), for the 2019-2020 school year.

The parties agree as follows:

1. **Contractor Services.** Contractor agrees to perform during the term of this agreement, the tasks, obligations and services of technology support coordinator
2. **Payment for Services.** Contractor agrees to undertake this work at an hourly rate of \$50.00, up to a maximum of \$2,000.00. All payments will be based on rents collected and turned into District by Contractor and approved by District's authorized representative. Contractor will invoice the District for services performed during the previous month. District will render payment to the Contractor within 30 days of receipt of invoice.
3. **Term of Agreement.** This Agreement begins on January 1, 2020 and ends June 30, 2020. Extension or renewal requires approval of District's Governing Board or its authorized representative. This agreement may be terminated by either party at any time on 30 days prior written notice.
4. **Time for Performance.** All services required of the Contractor will be completed on or before the specified end of the term.
5. **Records.** Contractor will maintain full and accurate records in connection with this Agreement and will make them available to District for inspection at any time. Contractor's work product produced under this Agreement shall be the property of the District.
6. **Status of Contractor.** District and Contractor agree that Contractor, in performing the services specified in this Agreement, shall act as an independent Contractor and shall have control of all work and the manner in which it is performed. Contractor shall be free to contract for similar services to be performed for other employers while under contract with District. Contractor will not accept such engagements which interfere with performance under this Agreement. Contractor is not an agent or employee of District. Contractor is not entitled to participate in any pension plan, insurance, or similar benefits the District provides for its employees.
7. **Hold Harmless.** Contractor shall hold District, its officers, agents and employees harmless from all suits, claims and liabilities resulting from negligent acts or omissions of Contractor, its officers, agents or employees taken under this Agreement.
8. **Compliance with Laws.** Contractor shall comply with all applicable federal, state and local laws, rules, regulations and ordinances involving its employees, including workers' compensation and tax laws.

9. **Modification or Assignment.** This Agreement may not be assigned by either party without the express written consent of the other. No modification shall be effective unless approved in writing by District's Governing Board or authorized representative.
10. **Designation of Representatives.** For purposes of performance and notifications, the representatives of the parties and their business addresses are as follows:

A. Contractor: Casey Stanford
 27631 Hartford Avenue
 Castaic, CA 91384
 661-478-6141

B. District: Gorman School District
 Johannis Andrews, Superintendent
 49847 Gorman School Road
 Gorman, CA 93243
 661-248-6441

Approved by the Board of Trustees, Gorman Joint School District, Gorman, California on February 11, 2020.

Contractor

District

 Signature Date
 Contractor

 Signature Date
 Superintendent

GORMAN JOINT SCHOOL DISTRICT

CONFERENCE/MILEAGE REPORT #06-19-20

February 11, 2020

PERSONNEL

Johannis Andrews

DATE(S)

2/29/20 - 3/4/20

CONFERENCE

SSDA Conference

LOCATION

Sacramento, CA

ESTIMATE

Registration	\$	448.00
Lodging	\$	829.13
Meals	\$	168.00
Parking	\$	52.00
<u>Mileage</u>	\$	<u>370.30</u>
Total	\$	1867.43

+++++

Steve Sonder, President
Patricia Edwards, Clerk
Julie Ralphs, Member

GORMAN JOINT SCHOOL DISTRICT

Johannis Andrews
Superintendent/Principal

49847 Gorman School Road
P.O. Box 104
Gorman, CA 93243
(661) 248-6441 - FAX (661) 248-0604

RESOLUTION # 11-19-20

BOARD OF TRUSTEES - ABSENCE

WHEREAS, Julie Ralphs, a Governing Board Member for the Gorman Joint School District was unable to attend the Regular Board Meeting held on January 14, 2020.

WHEREAS, the absence(s) was due to illness, to activities related to duties as a Board Member or other acceptable reasons pursuant to Education Code 35120,

THEREFORE, BE IT RESOLVED, that Julie Ralphs shall receive the full monthly stipend paid to Board Members for the month of January 2020.

PASSED AND ADOPTED this 11th day of February, 2020 by the Board of Trustees of the Gorman Joint School District.

Patricia Edwards, President