

**WORKERS COMPENSATION  
AND  
EMPLOYERS LIABILITY POLICY**

TYPE V INFORMATION PAGE WC 00 00 01 ( A)

**POLICY NUMBER:** UB-5Y646470-24-42-G  
NEW-24

**INSURER:** THE CHARTER OAK FIRE INSURANCE COMPANY  
A Stock Company

**NCCI CO CODE:** 15318

1.

**INSURED:**

MWR ENTERPRISES, INC.  
DBA R & P FOODS  
130 MCMURRY BLVD E  
HARTSVILLE, TN 37074

**PRODUCER:**

HIGGINBOTHAM INS AGENCY  
PO BOX 1309  
JASPER, AL 35502-1309

Insured is A CORPORATION

Other work places and identification numbers are shown in the schedule(s) attached.

2. The policy period is from 07-01-24 to 07-01-25 12:01 A.M. at the insured's mailing address.

3. **A. WORKERS COMPENSATION INSURANCE:** Part One of the policy applies to the Workers Compensation Law of the state(s) listed here:  
KY TN

**B. EMPLOYERS LIABILITY INSURANCE:** Part Two of the policy applies to work in each state listed in item 3.A. The limits of our liability under Part Two are:

Bodily Injury by Accident:	\$	500,000	Each Accident
Bodily Injury by Disease:	\$	500,000	Policy Limit
Bodily Injury by Disease:	\$	500,000	Each Employee

**C. OTHER STATES INSURANCE:** Part Three of the policy applies to the states, if any, listed here:

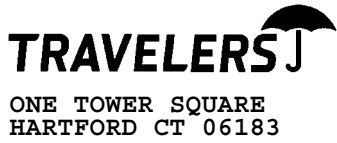
AL AR AZ CA CO CT DC DE FL GA HI IA ID IL IN KS LA MA MD ME MI MN  
MO MS MT NC NE NH NJ NM NV NY OK OR PA RI SC SD TX UT VA VT WI WV

**D.** This policy includes these endorsements and schedules:

SEE LISTING OF ENDORSEMENTS - EXTENSION OF INFO PAGE

4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All required information is subject to verification and change by audit to be made **ANNUALLY**

**DATE OF ISSUE:** 06-24-24 BY  
**OFFICE:** BIRMINGHAM AL 014  
**PRODUCER:** HIGGINBOTHAM INS AGENCY HE565



WORKERS COMPENSATION  
AND  
EMPLOYERS LIABILITY POLICY

TYPE V INFORMATION PAGE WC 00 00 01 ( A)

POLICY NUMBER: UB-5Y646470-24-42-G

CLASSIFICATION SCHEDULE:

CLASSIFICATIONS	CODE NO	PREMIUM BASIS ESTIMATED TOTAL ANNUAL REMUNERATION	RATES PER \$100 OF REMUNERATION	ESTIMATED ANNUAL PREMIUM
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SEE EXTENSION OF INFORMATION PAGE - SCHEDULE(S)

SIC-CODE: 5411 NAICS: 445110

		STANDARD
TOTAL ESTIMATED ANNUAL STANDARD PREMIUM	\$	8649
PREMIUM DISCOUNT		NONE
0900-41 EXPENSE CONSTANT		160
TERRORISM		83
CAT (OTHER THAN CERT ACTS OF TERRORISM)		174
TOTAL ESTIMATED PREMIUM		9066
TAXES AND SURCHARGES		288
DEPOSIT AMOUNT DUE		9354

Minimum Premium: \$ 400

EMPLOYERS LIABILITY MINIMUM: \$100

DATE OF ISSUE: 06-24-24 BY

OFFICE: BIRMINGHAM AL 014

PRODUCER: HIGGINBOTHAM INS AGENCY HE565

COUNTERSIGNED-AGENT

**WORKERS COMPENSATION  
AND  
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EXTENSION OF INFO PAGE-SCHEDULE WC 00 00 01 ( A)

POLICY NUMBER: UB-5Y646470-24-42-G

INSURER: TRAVELERS CASUALTY INSURANCE COMPANY OF AMERICA

INSURED'S NAME: MWR ENTERPRISES, INC.

12432-KY

RATE BUREAU ID: 917963371

EXP. MOD. EFFECTIVE DATE: 07-01-24

CLASSIFICATION	CODE	PREMIUM BASIS ESTIMATED TOTAL ANNUAL REMUNERATION	RATES PER \$100 OF REMUNERATION	ESTIMATED ANNUAL PREMIUM
LOCATION 001				
FEIN 621300527 ENTITY CD 001 00				
MWR ENTERPRISES, INC.				
DBA R & P FOODS				
402 N MAIN ST				
FRANKLIN , KY 42134				
NAICS: 445110				
STORE: SUPERMARKET	8033	645117.00	0.82	5290
CLERICAL OFFICE EMPLOYEES NOC	8810	27583.00	0.09	25

KY MANUAL PREMIUM \$ 5315

0.80% EMPL. LIAB. INCREASED LIMITS (9807)	\$	43
TOTAL PREMIUM SUBJECT TO EXPERIENCE MOD.		5358
EXPERIENCE MODIFICATION:0.8 MODIFIED PREMIUM		4286
TOTAL ESTIMATED ANNUAL STANDARD PREMIUM		4286
TERRORISM(9740)		40
CAT(OTHER THAN CERT ACTS OF TERRORISM) (9741)		81
TOTAL ESTIMATED PREMIUM		4407
6.53% KY SPECIAL FUND ASSESSMENT		288
TOTAL PREMIUM		4695
DEPOSIT AMOUNT DUE		4695

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EXTENSION OF INFO PAGE-SCHEDULE WC 00 00 01 ( A)

POLICY NUMBER: UB-5Y646470-24-42-G

INSURER: THE CHARTER OAK FIRE INSURANCE COMPANY

INSURED'S NAME: MWR ENTERPRISES, INC.

15318-TN

RATE BUREAU ID: 917963371

EXP. MOD. EFFECTIVE DATE: 07-01-24

CLASSIFICATION	CODE	PREMIUM BASIS ESTIMATED TOTAL ANNUAL REMUNERATION	RATES PER \$100 OF REMUNERATION	ESTIMATED ANNUAL PREMIUM
LOCATION 001				
FEIN 621300527 ENTITY CD 001 00				
MWR ENTERPRISES, INC.				
DBA R & P FOODS				
130 MCMURRY BLVD E				
HARTSVILLE , TN 37074				
NAICS: 445110				
STORE: SUPERMARKET	8033	590763.00	0.91	5376
CLERICAL OFFICE EMPLOYEES NOC	8810	26522.00	0.07	19

TN MANUAL PREMIUM \$ 5395

1.10% EMPL. LIAB. INCREASED LIMITS (9807)	\$	59
TOTAL PREMIUM SUBJECT TO EXPERIENCE MOD.		5454
EXPERIENCE MODIFICATION:0.8 MODIFIED PREMIUM		4363
TOTAL ESTIMATED ANNUAL STANDARD PREMIUM		4363
EXPENSE CONSTANT (0900)		160
TERRORISM (9740)		43
CAT (OTHER THAN CERT ACTS OF TERRORISM) (9741)		93
TOTAL ESTIMATED PREMIUM		4659
TOTAL PREMIUM		4659
DEPOSIT AMOUNT DUE		4659

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**LISTING OF ENDORSEMENTS  
EXTENSION OF INFO PAGE**

We agree that the following listed endorsements form a part of this policy on its effective date.

WC 00 00 01 A - 001	INFORMATION PAGE
WC 00 00 01 A - 001	INFORMATION PAGE 2
WC 00 00 01 A - 001	EXTENSION OF INFORMATION PAGE - SCHEDULE
WC 00 00 01 A - 001	ENDORSEMENT LISTING
WC 00 04 14 A - 001	NOTIFICATION OF CHG IN OWNR ENDT
WC 00 04 22 C - 001	TERRORISM RISK INS PROG REAUTH ACT ENDT
WC 00 04 24 00 - 001	AUDIT NONCOMPLIANCE CHARGE ENDORSEMENT
WC 00 04 25 00 - 001	EXPER RATING MOD FACTOR REVISION ENDT
WC 99 03 C3 00 - 001	SPECIAL PROVISIONS ENDT
WC 99 04 28 00 - 001	PREMIUM MANUALS AND DUE DATE ENDORSEMENT
WC 00 04 21 F - 001	CATASTROPHE (O/T CERT ACTS OF TERR) ENDT
WC 00 03 08 00 - 001	PARTNERS OFFICERS AND OTHERS EXCL ENDT
WC 16 03 05 00 - 001	KY PART ONE WC INSURANCE ENDORSEMENT
WC 16 06 01 00 - 001	KY CANCELATION AND NONRENEWAL ENDT.
WC 16 06 02 00 - 001	KY NOTICE OF APPEAL RIGHTS ENDORSEMENT

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## **PARTNERS, OFFICERS, AND OTHERS EXCLUSION ENDORSEMENT**

The policy does not cover bodily injury to any person described in the Schedule.

The premium basis for the policy does not include the remuneration of such persons.

You will reimburse us for any payment we must make because of bodily injury to such persons.

### **SCHEDULE**

#### **PARTNERS**

#### **OFFICERS**

YVONNE REESE

MIKE REESE

#### **OTHERS**