

ARLINGTON PUBLIC SCHOOLS

In accordance with the provisions of the Massachusetts General laws, Chapter 30A, Section 20, notice is hereby given for the following meeting of the:

***Arlington School Committee
School Committee Regular Meeting
Thursday, January 24, 2019
6:30 PM***

6:30 PM Open Meeting

- *Artwork from Brackett Elementary*

6:35 PM Public Participation

6:40 PM AHS Students Public Policy Start Time

7:15 PM Suspensions and School Discipline Update, M. Janger and B. Meringer

6:55 PM Program of Studies for AHS, W. McCarthy

7:45 PM Monthly Financial Report, M. Mason

7:55 PM Superintendent's Report, K. Bodie

- *AHS Building Project Update*
- *Parmenter Cost Analysis*

8:15 PM Consent Agenda

All items listed with an asterisk are considered to be routine and will be enacted by one motion. There will be no separate discussion of these items unless a member of the committee so requests, in which event the item will be considered in its normal sequence:

- *Approval of Warrant: Warrant # 19131, dated for 1/10/2019 in the amount of \$792,425.06*
- *Approval of Minutes: None*
- *Approval of Trip: Nagaokakyo, Japan trip for this July 2019.*
- *Approval of Trip: AHS Performing Arts New York City, May17-20 2019*

8:20 PM Subcommittee/Liaison Reports/Announcements

Budget: Len Kardon, Chair

Community Relations: Jennifer Susse, Chair

Curriculum, Instruction, Assessment & Accountability: Jeff Thielman, Chair

Facilities: Bill Hayner, Chair

Policies & Procedures: Paul Schlichtman, Chair

Legal Services Review: Bill Hayner; Len Kardon

Arlington High School Building Committee: Jeff Thielman, Kirsi Allison-Ampe
Gibbs Committee: Jane Morgan
Liaisons Reports
Announcements
Future Agenda Items

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Executive Session

To conduct strategy sessions in preparation for negotiations with union and/or nonunion personnel or contract negotiations with union and /or nonunion in which if held in an open meeting, may have a detrimental effect.

To conduct strategy with respect to collective bargaining or litigation, in which if held in an open meeting, may have a detrimental effect. Collective bargaining may also be conducted.

8:45 PM Adjournment

The listings of matters are those reasonably anticipated by the Chair, which may be discussed at the meeting. Not all items listed may in fact be discussed and other items not listed may also be brought up for discussion to the extent permitted by law.

Stated times and time amounts, listed in parenthesis, are the estimated amount of time for that particular agenda item. Actual times may be shorter or longer depending on the time needed to fully explore the topic.

Submitted by Kirsi Allison-Ampe, MD, Chair

Correspondence Received:

Warrant dated 1 10 2019

Approval of NYC trip

Approval of Japan Trip

Program of Studies 2019-2020

Public Policy Start Time

Suspension and School Discipline Update



Town of Arlington, Massachusetts

6:30 PM Open Meeting

Summary:

- Artwork from Brackett Elementary

ATTACHMENTS:

	Type	File Name	Description
▢	Presentation	artwork.pdf	Art work

ACTION & MOTION PAINTINGS

Grade Five

Students in grade five first examined three paintings in which movement was depicted by abstract artists, Elaine de Kooning, in a style called **Expressionism**, and Carlo Carra and Natalia Goncharov and in a style known as **Futurism**. In both styles, the artists abstracted by leaving out details, capturing the main idea or feeling in a subject, while also moving the brush in a way that matches a feeling the artist wants to express. At the turn of the 20th century, these artists thought motion and energy were important ideas for current and future art. Students were led to notice how the artists explored ways to show the motion and energy of people, animals, machines and other subjects using repeated lines, broken shapes, blurred colors, etc.

Later, students were instructed to create a painting which depicted at least one person, animal, machine and/or object in motion. Students were required to emphasize movement in a manner that suggested energy or motion. Artist mannikins and photos with which to work from were available for student use.

USING LINE CONSTRUCTIVELY: TREE LINE DRAWINGS

Grade One

For their first lesson of the year, first graders revisited the element of **Line** and discussed how lines can be found everywhere in our world and that artists can use different kinds of lines to express their ideas more fully. Students examined and discussed several examples of line drawings by various artists, explaining how each artist used Line. Next, students were shown several paintings of trees done by different artists and explored how each tree was represented differently using various and often unexpected types of lines. Students were led to notice how using a particular type of line changes the way we expect a tree to look.

Finally, students were instructed to create a line drawing of their own choice. That said, everything in the picture had to be constructed from a variety of appropriate lines AND the subject had to include at least one tree. They were encouraged to think about how lines can be used to represent the many parts of a tree and different species of trees. Students were given artworks created by Asian artists which depicted different species of trees during different seasons to help them think about the many ways line can be used.

TINY TREASURE BOXES

Grade Three

Third graders discussed the use and decoration of container design. They discussed how this wooden box created by a Japanese artist, had the special purpose of storing incense. Noting the planning and execution of design upon a three-dimensional cube, and its possible function and purpose, allowed students to realize that everyday objects can be made beautiful by artistic skills.

Students were given a template of a box which they were then instructed to decorate using pencils and/or markers, giving special attention to how one side of the box could impact another side, as well as the top and bottom, in a wrap-around design. Attention was brought to the fact that there are several ways to accomplish a wrap-around design, but a specific theme had to be chosen to successfully unify all sides of the box.

PAPER PENDANTS

Grade Two

Why do people wear jewelry? Students in grade two learned that people everywhere have decorated themselves with jewelry since ancient times, often for many different reasons. Students examined and discussed several different artisan pendants, some of which incorporated necklace structure, as well. The examples ranged in time period and materials, and students were asked to look for clues to help them determine how each pendant was created. They enjoyed seeing how different cultures have varying styles, how different artists use the same materials differently and how styles have changed over time. Despite the differences, however, some jewelry-making techniques have remained similar over the centuries.

Students were instructed to design and create their own pendant from paper and aluminum foil. They were encouraged to include additional decorations with markers and pencils.

GRAPHIC DESIGN: CEREAL BOX DESIGN

Grade Four

Fourth graders were shown three consumable items (a bottle of glue, a box of mints, etc) and asked to look carefully at their packaging to identify what all three had in common. Students noticed that all three packages had use of colors, pictures, company logos, and fonts and letterstyles. Students discussed why packages of items we purchase make use of special design elements, and that such elements are planned and designed by artists known as graphic designers. The role of the graphic designer was explained and a list was generated of the many things which employ text and pictures that graphic designers plan, which we use and see everyday.

Students were also shown several examples of laundry detergent bottles and were led to notice that planning all the visual and text elements within package design can convey visual messages to consumers. Classes were then told they would be designing a package for a fictitious cereal brand of their own naming. They were encouraged to invent mascots, logos and company names. They were required to include pictures and lettering, as well as think about fonts and font sizes, colors, placement and various visual elements.



Town of Arlington, Massachusetts

6:35 PM Public Participation



Town of Arlington, Massachusetts

6:40 PM AHS Students Public Policy Start Time

ATTACHMENTS:

Type	File Name	Description
▢ Backup Material	Public_Policy_Start_Time_Memo.pdf	AHS Public Policy Start Time memo
▢ Reference Material	Copy_of_School_Start_Presentation_For_School_Board.pdf	AHS Start Time Presentation

TO: Arlington Public Schools Administrative Staff
FROM: Kolya Shields, Ben Austen
DATE: January 16, 2019
SUBJECT: Implementation of an 8:30 AM School Start Time at Arlington High School

The 8:00 start of Arlington High School reduces students' amount of sleep, negatively impacting their mental and physical health and academic achievement. According to The Sleep Foundation, a nationally accredited medical foundation, teenagers need to get at least 8 hours of sleep a night to be properly focused in school and health. The Youth Health and Safety Survey reported that in the 2017-18 School Year 74.8% of AHS students got less than 8 hours of sleep a night, decreasing their performance and health.

Our proposed policy is a direct governmental action to move the current 8:00 start time to 8:30. This change is minimal, and will be a small adjustment to teachers' commutes and after-school activities. However, the extra half-hour in the morning will prove very beneficial for students, as even an extra 30 minutes of time in the morning will help students be healthier as well as more awake and alert during class.

Our Benchmarks are the reported percentages from the Arlington Youth Health and Safety Survey of AHS students getting less than 8 hours of sleep. We are watching 2018/19 - 2021/2022 and want to see the amount of students getting less than 8 hours of sleep go down to 61% by 2021-22. Our projections of baseline percentages are based off input from guidance, and we believe we can help reverse the trend of decreased sleep with our policy.

Most of the important players related to the implementation to this policy are in favor of it because this policy has very few downsides. Dr. Matthew Janger is in favor of the policy and Mrs. Kathleen Bodie has sent out a survey exploring the opportunity. Mr. McG, chair member of the Arlington Education Association, is also in favor of it. None of the people we interviewed with large influence and power are against our policy. Overall, the feasibility of this policy is high.

School Start Time Policy Presentation

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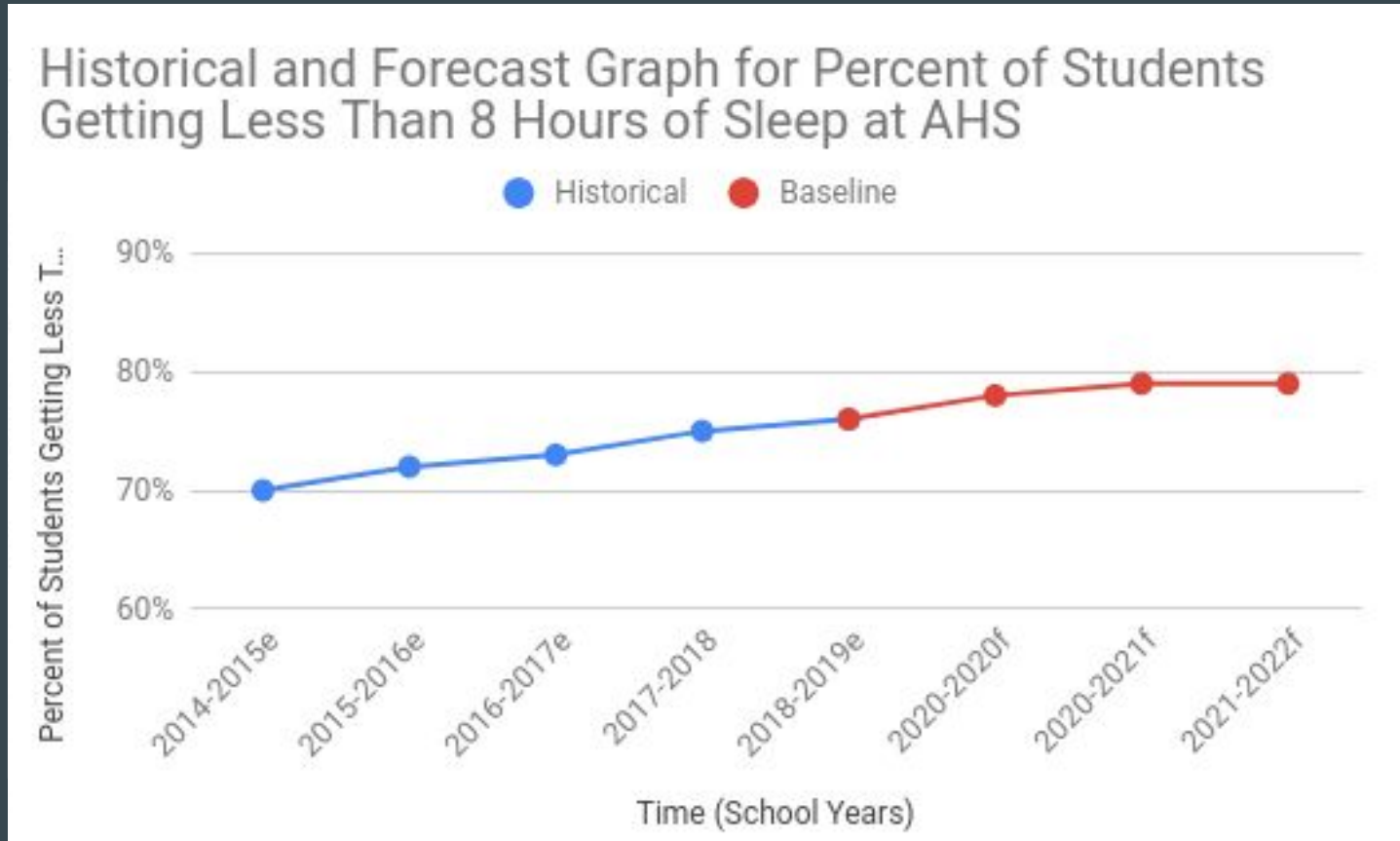
Kolya Shields

Ben Austen

Societal Problem

The early start time of Arlington High School diminishes the health and economic opportunity of students who attend, because it is more difficult for students to learn if they are not awake or alert in class, and it is unhealthy for teenagers to consistently get less than 8 hours of sleep every night.

Arlington High Student Sleep Data and Predictions (No Time Change)



Source:
Arlington
YHSC
High
School
Survey

Major Effects of Societal Problem

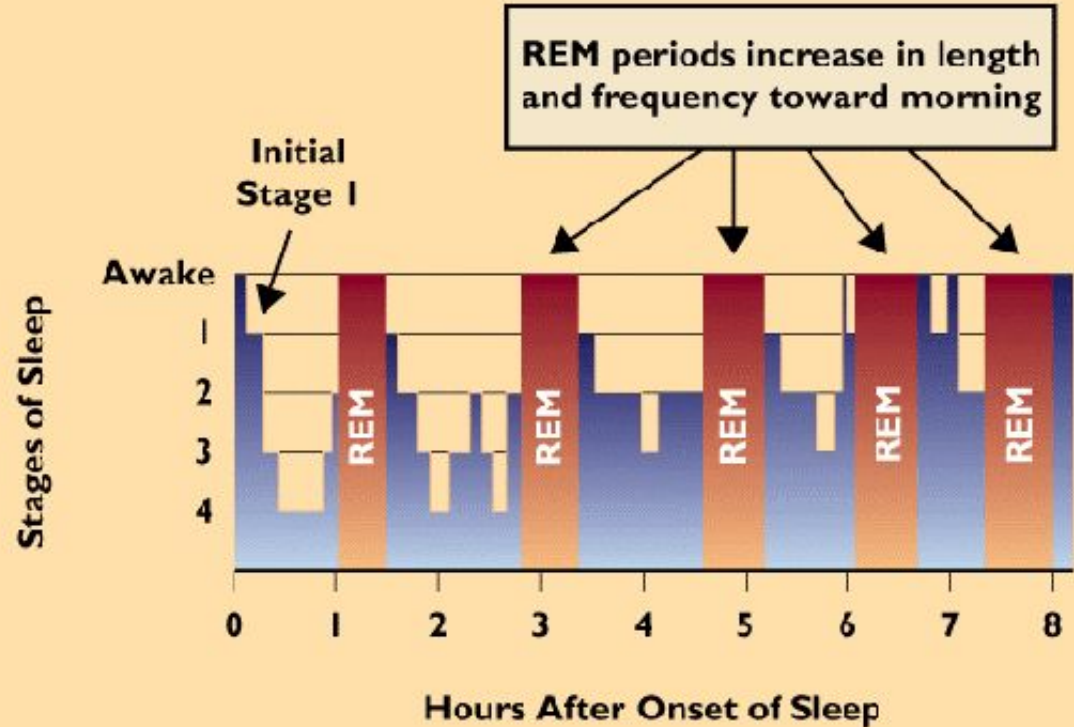
Decreased Health due to Decreased Sleep

- “Studies show that sleep deficiency harms your driving ability as much as, or more than, being drunk. It's estimated that driver sleepiness is a factor in about 100,000 car accidents each year, resulting in about 1,500 deaths” (National Heart, Lung, and Blood Institute)
- “Depressed patients who experience sleep disturbances are more likely to think about suicide and die by suicide than depressed patients who are able to sleep normally.” (Harvard Health Publishing 2018)

Decreased Academic Performance Due to Decreased Sleep

Sources we used included National Sleep and Student Health Foundations such as Harvard Health Publishing and the National Heart, Lung and Blood Institute as well as medical research journals exploring the effects of sleep deprivation

REM Sleep Graph



Source: Prince George's
Community College

Why 8:30?

- If it were earlier, like 8:15, students would see a marginal at best increase in sleep because 15 minutes isn't a large difference
- If it were later, sports and extracurriculars would run very late, sports in particular losing time due to lack of lights and interfering with students' jobs

Implementation

- ❑ The Middlesex League has been discussing Start Time Changes and coordinating them for a reasonable amount of time. The administrators in the Middlesex League would organize logistics for sports and ensure all the start times would effectively work with each other
- ❑ The Superintendent and AHS Principal would work with the School Committee to integrate this policy into Arlington High School smoothly

Possible Issues

- Could conflict with after-school activities, specifically sports teams, and their practices and games against other schools in the league
- Could create difficulties with morning commutes for teachers, as teachers would be more likely to get stuck in rush-hour traffic from the 7:00 to 8:30 AM range



Town of Arlington, Massachusetts

7:15 PM Suspensions and School Discipline Update, M. Janger and B. Meringer

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	SuspensionData2017_2018_Final_(1).pdf	AHS Suspensions and School Discipline

Arlington Public Schools

2017-2018 Suspension Data

Data Source: 2017-2018 Student Information System - Discipline log
2017-2018 School Safety and Discipline Report

District Summary

Arlington High School

49 Suspensions
42 Students Suspended
10 Female
32 Male

Ottoson Middle School

28 Suspensions
21 Students Suspended
10 Female
11 Male

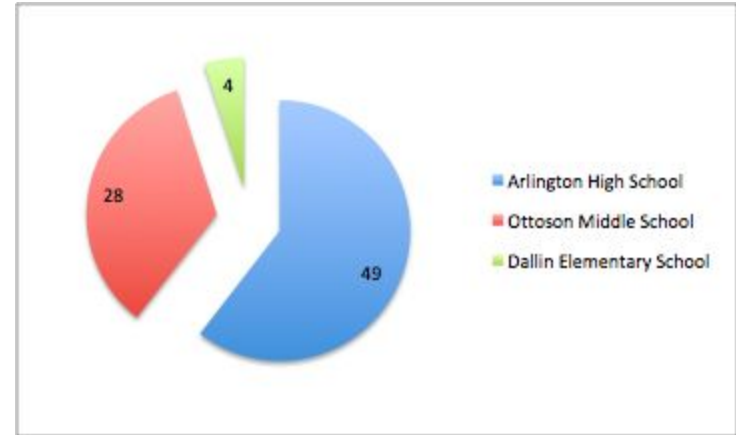
Dallin Elementary School

4 Suspensions
4 Students Suspended
4 Male

District Summary Number of Suspensions

2017/2018

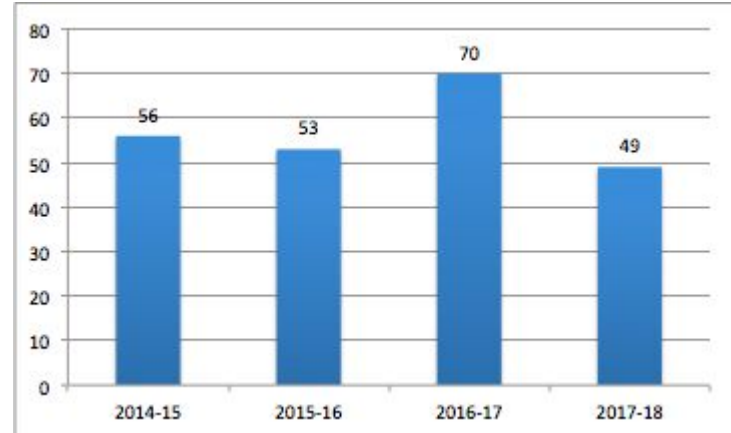
Arlington High School	49
Ottoson Middle School	28
Dallin Elementary School	4
Total	81



AHS Discipline Trends

Total suspensions - out of school

- 2014-15 - 56
- 2015-16 - 53
- 2016-17 - 70
- 2017-18 - 49
- 2018-19 - 12 to date 10/1/19



AHS Offense Types 2017-2018 OSS & ER

Drugs Excluding Alcohol and Tobacco	15
Harassment, Nonsexual	1
Obscene Behavior	1
Other Criminal Offenses	4
Other Non-Criminal Offenses	9
Theft	1
Threat/Intimidation	3
Vandalism	14
Weapons Possession	1

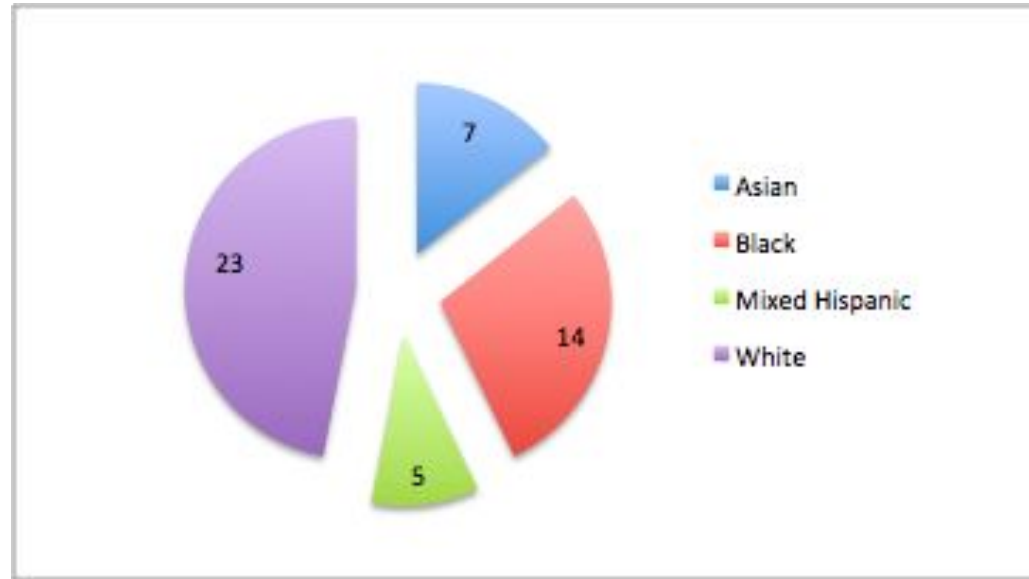
Arlington High School

of Suspensions 49

2017-2018

Arlington High School # of
Suspensions

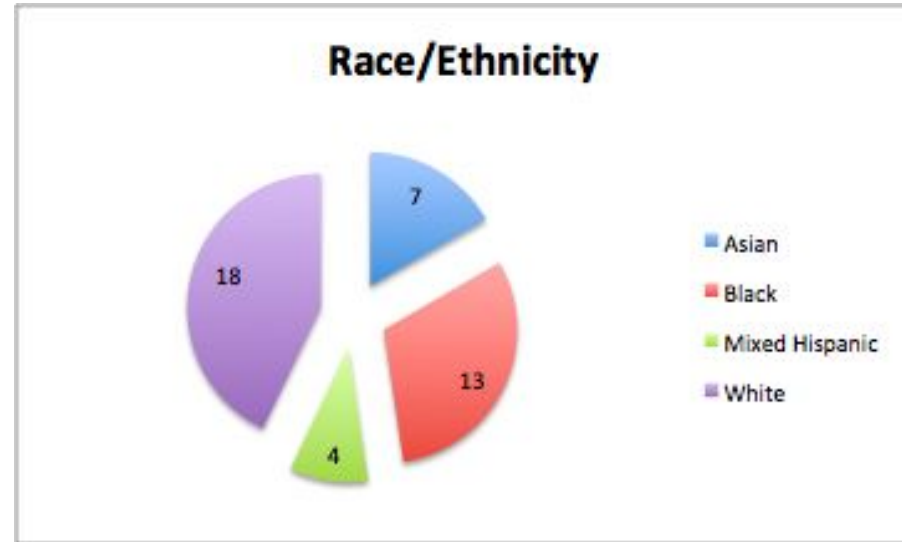
Asian	7
Black	14
Mixed Hispanic	5
White	23
Total	49



Arlington High School

of Students Suspended 42

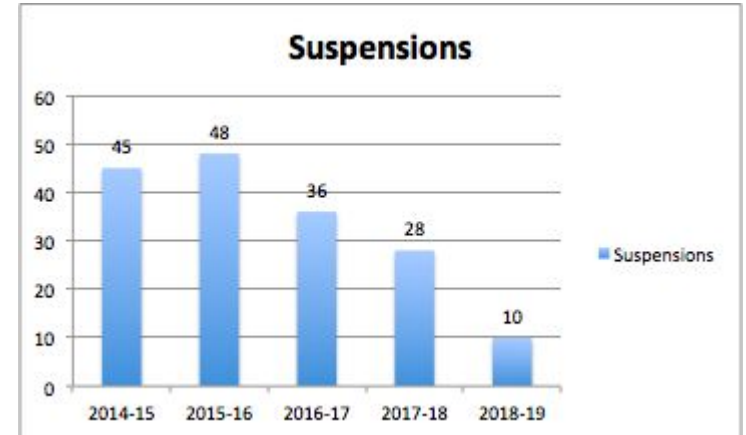
Race/Ethnicity	Female	Male	Total	% of Pop
Asian	1	6	7	0.5%
Black	5	8	13	0.9%
Mixed Hispanic	1	3	4	0.3%
White	3	15	18	1.35%
Total	10	32	42	3.16%



MS Discipline Trends - Gibbs & Ottoson

Total suspensions - out of school

- 2014-15 - 45
- 2015-16 - 48
- 2016-17 - 36
- 2017-18 - 28
- 2018-19 - 10 (5 & 5) to date 1/10/19



OMS Offence Types 2017-2018

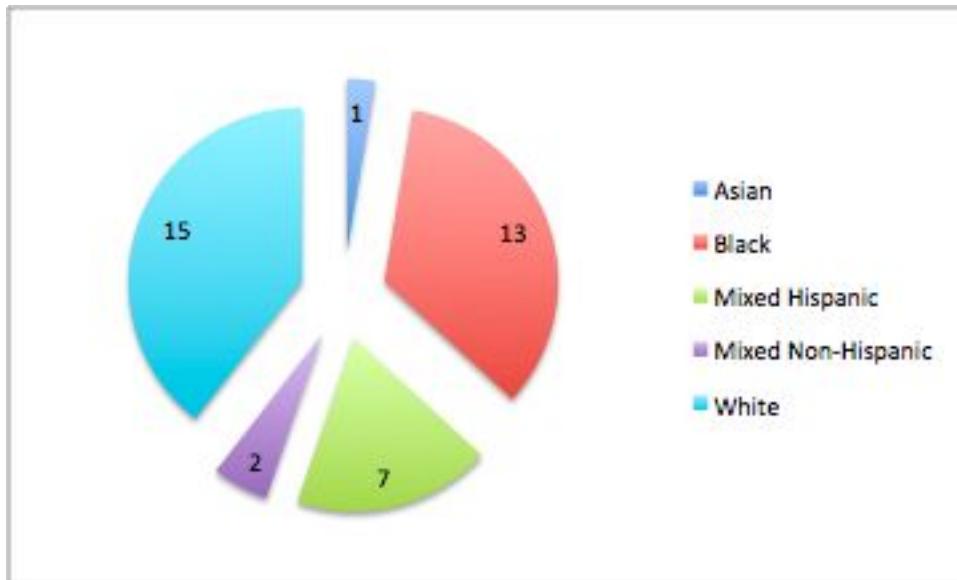
Obscene Behavior	1
Other Non-Criminal Offenses	9
Theft	1
Threat/Intimidation	11
Tobacco	3
Vandalism	2

Ottoson Middle School

of Suspensions 28

Ottoson Middle School # of
Suspensions

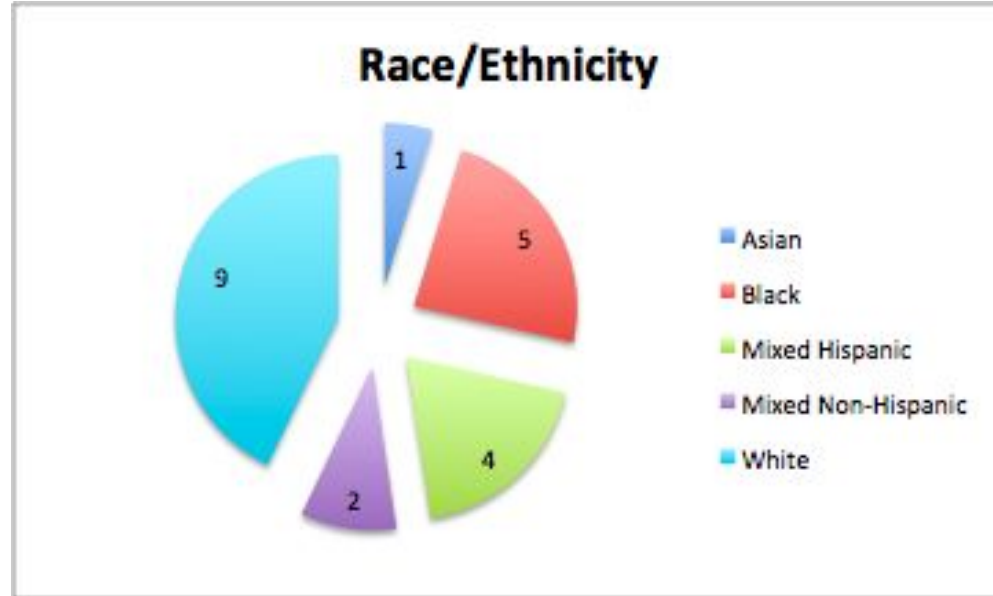
Asian	1
Black	5
Mixed Hispanic	4
Mixed Non-Hispanic	2
White	9
Total	28



Ottoson Middle School

of Students Suspended 21

Race/Ethnicity	Female	Male	Total	%of Pop
Asian	0	1	1	0.08%
Black	3	2	5	0.39%
Mixed Hispanic	3	1	4	0.29%
Mixed Non-Hispanic	2	0	2	0.16%
White	2	7	9	0.71%
Total	10	11	21	1.67%



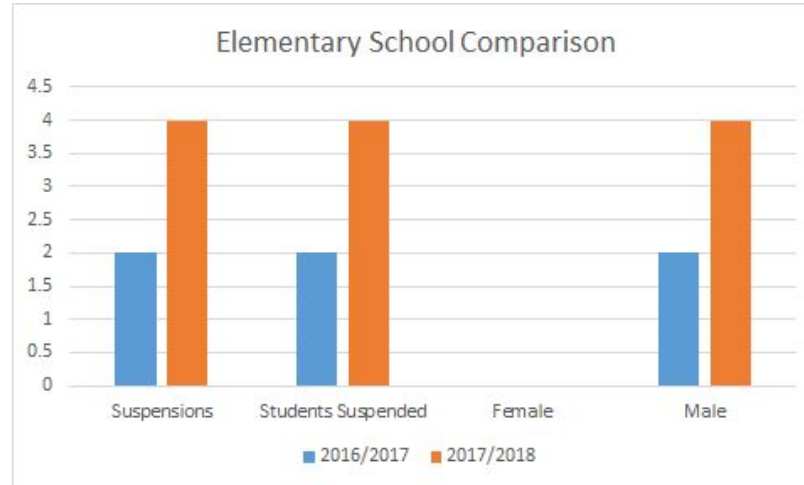
Elementary School Comparison

Elementary School 2016/2017

2 Suspensions
2 Students Suspended
2 Male

Elementary School 2017/2018

4 Suspensions
4 Students Suspended
4 Male

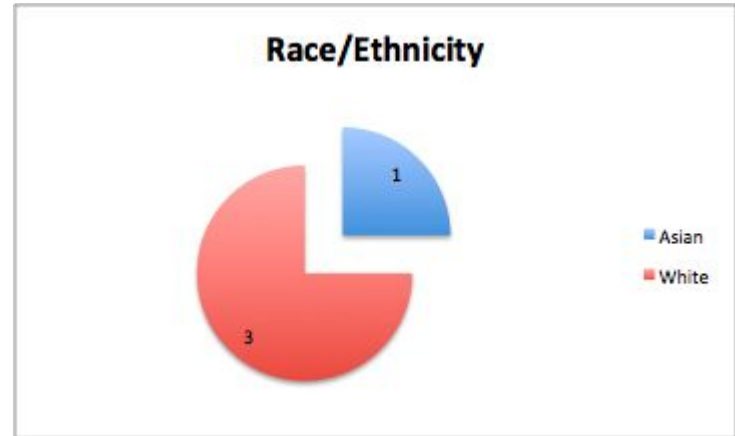


Dallin Elementary School

of Suspensions 4

Dallin Elementary School # of
Suspensions

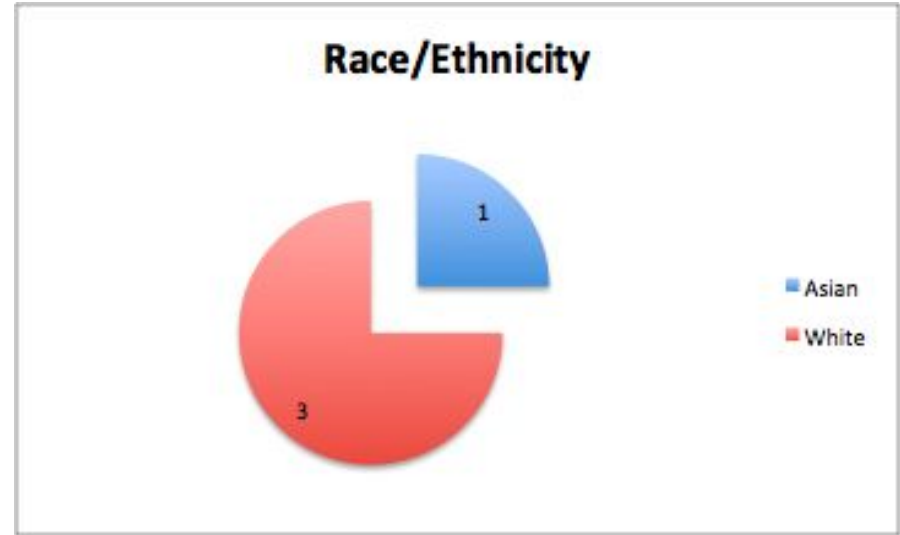
Asian	1
White	3
Total	4



Dallin Elementary School

of Students Suspended 4

Race/Ethnicity	Female	Male	Total
Asian	0	1	1
White	0	3	3
Total	0	4	4





Town of Arlington, Massachusetts

6:55 PM Program of Studies for AHS, W. McCarthy

ATTACHMENTS:

	Type	File Name	Description
▢	Document for Approval	Program_of_Studies_2019-2020__Updates.pdf	Program of Studies 2019-2020

Arlington High School
Program of Studies 2019-2020
Updates and New Courses

Policy and General Information Updates

- Home School Students Policy (for submission to the policy sub-committee)

Courses

New Courses

AC3610Z Art and Technology I - Curriculum A	Grades 9, 10, 11, 12	2.5 credits
AC3611Z Art and Technology II - Curriculum A	Grades 9, 10, 11, 12	2.5 credits
AC3600Z Ceramic Sculpture and Pottery I - Curriculum A	Grades 10, 11, 12	2.5 credits
AC3603Z Ceramic Sculpture and Pottery II - Curriculum A	Grades 10, 11, 12	2.5 credits
AC3825Z Drawing I - Curriculum A	Grades *9, 10, 11, 12	2.5 credits
AC3826Z Drawing II - Curriculum A	Grades * 9, 10, 11, 12	2.5 credits
AC3602Z Sculptural and Functional Woodworking - Curriculum A	Grades 9, 10, 11, 12	5 credits
AC3613Z Woodworking II - Curriculum A	Grades 10, 11, 12	5 credits
PE7916Z Athletic Training	Grades 11, 12	2.5 credits
SC4009Z Advanced Placement Physics 3	Grades 11, 12	5 credits
SS7804Z AP Human Geography	Grades 10, 11, 12	5 credits
SS7293Z The Economics of Personal Finance	Grades 11, 12	2.5 credits
SS7295Z Introduction to Economics (Semester Course)	Grades 11, 12	2.5 credits
SS7805Z Participation in Government: Public Policy (Non-SUPA)	Grades 10, 11, 12	2.5 credits
SS7390Z Social History Through Sports	Grades 10, 11, 12	2.5 credits
PE R.A.D. Basic Physical Self Defense	Grades 11,12	2.5 credits
PE R.A.D. for Men	Grades 11,12	2.5 credits

Full Course Descriptions are given below.

Courses being reactivated:

Intro to Economics

Economic Ideas & Policy (SUPA)

Courses being removed:

MA7250Z Fabrication lab - removed 2018-2019

SC7280Z Introduction to Archaeology - removed 2018-2019

PA9240Z PEP Band - Curriculum A

SS7800Z Public Policy and Civic Action

SS7296Z Economics for Life (Curr A)

SS7297Z Economics for Life (Honors)

Course Descriptions for New Courses

AC3610Z Art and Technology I - Curriculum A**Grades 9, 10, 11, 12****2.5 credits**

This is a studio class that explores the intersection of contemporary art and technology. Students will be introduced to tools including microcontrollers, robotics, 3D printers, and the laser cutter to create original art that responds to issues relevant to modern culture and their personal experiences. Art and Tech I will focus on both contemporary and historical artists and art forms, tool training, developing skills, and making meaning through art making. Collaborative projects will be encouraged. Art and Technology I and II can be taken consecutively to fulfill the 5-credit Fine Arts Graduation Requirement.

AC3611Z Art and Technology II - Curriculum A**Grades 9, 10, 11, 12****2.5 credits**

This is a studio class that explores the intersection of contemporary art and technology. Students will be introduced to tools including microcontrollers, robotics, 3D printers, and the laser cutter to create original art that responds to issues relevant to modern culture and their personal experiences. Art and Tech II will also focus on both contemporary and historical artists and art forms, developing higher level skills, and making meaning through art making. Collaborative projects will be encouraged. Art and Tech II give students the opportunity to apply skills learned in Art and Technology I and to create personal artwork on a more independent basis. Art and Technology I and II can be taken consecutively to fulfill the 5-credit Fine Arts Graduation Requirement. **Prerequisite Art and Technology I**

AC3600Z Ceramic Sculpture and Pottery I - Curriculum A**Grades 10, 11, 12****2.5 credits**

This half-year course introduces students to the use of clay as a sculptural material to create both functional and aesthetic objects.. Through this course students are able to develop their own personal style through hand building and wheel throwing. Students use clay to convey meaning and emotion while creating personalized works of art. A variety of surface treatments and glazing techniques will be taught. Students learn how clay is being used now in the contemporary art world as well as historical approaches in many world cultures. This course fulfills 2.5 credits toward the 5-credit Fine Art Graduation Requirement.

Suggested Entry Criteria: "Foundations in Studio Art" (formerly called Art I) or permission of the instructor

AC3603Z Ceramic Sculpture and Pottery II - Curriculum A**Grades 10, 11, 12****2.5 credits**

In this half-year course, students expand their technical skills using clay to create personally meaningful works of art that are functional, sculptural and aesthetic. Students are challenged to develop more sophisticated thinking and making skills to explore the expressive and sculptural possibilities of clay as well as to create more complex useful ceramic vessels. The course includes a variety of hand building and wheel-throwing techniques, pushes the potential for large-scale works, and further explores surface treatments and glazing techniques. Projects and techniques are taught with reference to contemporary and historical art and ceramics from around the world. Previous student experience with clay is preferred. This course fulfills one half of the Fine Arts Graduation Requirement.

Suggested Entry Criteria: "Foundations in Studio Art" (or permission of the instructor).

AC3825Z Drawing I - Curriculum A**Grades *9, 10, 11, 12****2.5 credits**

Drawing I provides an introduction to the foundational skills of drawing using a wide range of media and contemporary methods. Students develop new ways of seeing and interpreting organic and man-made forms. Unusual perspectives, compositions, and viewpoints will be explored. Throughout the course, students experiment with abstraction, surrealism, conceptual, and representational (realistic) artistic styles. Students develop skills in analyzing and discussing artwork as they study and research a range of artists' drawings, styles, methods, and processes. Students also understand that they can communicate personal ideas and express their artistic identities through the act of drawing. Formal issues in drawing such as the use of mark-making, line, space, scale, light and dark and composition are studied. Students maintain an active sketchbook for planning, idea development, and out-of-school assignments.

This course fulfills one half of the Fine Arts Graduation Requirement

Suggested Entry Criteria: "Foundations in Studio Art" (* or permission of the instructor).

AC3826Z Drawing II - Curriculum A**Grades * 9, 10, 11, 12 2.5 credits**

In this more advanced drawing course students investigate a broad range of approaches to drawing. Students learn that creative drawing is an art form in its own right. Students explore different ways of using materials and tools to communicate and express personal ideas and interests. Drawing II builds on students' skills in the use of mark-making, line, scale, space, light and dark and composition in styles that emphasize both realism and abstraction and in both contemporary and historical contexts. Students discover that "drawing" can include all kinds of media including dry and liquid media, collage, and even three-dimensional drawing materials. Students maintain an active sketchbook for planning, idea development, and out-of-school assignments.

This course fulfills one half of the Fine Arts Graduation Requirement

Suggested Entry Criteria: "Foundations in Studio Art" (* or permission of the instructor).

AC3602Z Sculptural and Functional Woodworking - Curriculum A Grades 9, 10, 11, 12 5 credits

Sculptural and Functional Woodworking is a yearlong class that cultivates students' skills related to designing and fabricating both functional and sculptural structures from wood. This class explores the relationship between functional and non-functional artworks through discussion and making. Students are introduced to relevant tools, skills, and projects that are presented in an open-ended way. This approach encourages creative problem solving and requires students to design and build one-of-a-kind objects. The projects are also presented in the context relevant to professional fields including carpentry, architecture, sculpture, and industrial design. **This course fulfills the 5-credit Fine Arts Graduation Requirement. (Formerly called Wood Tech)**

AC3613Z Woodworking II - Curriculum A**Grades 10, 11, 12 5 credits**

Woodworking II is a yearlong class for students who have completed Woodworking I and are interested in further developing their skills. The assignments will include problem solving and completing building projects in the AHS community as well as creating original work. Permission of the instructor is required.

Prerequisite: Wood Tech.

PE7916Z Athletic Training**Grades 11, 12 2.5 credits**

This course provides high school students with a general overview of athletic training and sports medicine. It includes introductory information about the AT's scope of practice: injury prevention, treatment, rehabilitation, emergency injury management and administrative functions. This course is intended to help students gain an understanding of sports medicine, various associated disciplines and the role they play in the physically active community. This course is led by a certified and licensed Athletic Trainer.

SC4009Z Advanced Placement Physics 3**Grades 11, 12 5 credits**

Physics 3: Mechanics is designed to be the equivalent of a college, calculus based physics course in mechanics. It adheres to the requirements of the College Board AP C Mechanics curriculum. It will provide instruction in each of the following six content areas: kinematics; Newton's laws of motion; work, energy and power; systems of particles and linear momentum; circular motion and rotation; and oscillations and gravitation – and appropriate laboratory experiences. Analysis of problems as well as the AP Physics C exam will expect the use of calculus as a fundamental tool, and therefore AP Physics C requires a sound knowledge of Calculus by the student.

Suggested Entry Criteria: Successful completion or knowledge of fundamental Calculus skills and general excellence in prior science and math classes. Teacher and Science Director approval is required. (For Grade 11 or 12, may enroll with recommendation of the math and science teacher, and permission of the Science Director are required. It will be available only if enrollment minimums are reached and if staffing is available.)

SS7804Z AP Human Geography**Grades 10, 11, 12 5 credits**

The AP Human Geography course is equivalent to an introductory college-level course in human geography. The course introduces students to the systematic study of patterns and processes that have shaped human understanding, use, and alteration of Earth's surface. Students employ spatial concepts

and landscape analysis to examine socio economic organization and its environmental consequences. They also learn about the methods and tools geographers use in their research and applications. The curriculum reflects the goals of the National Geography Standards (2012).

NOTE: Students choosing to take this AP level course will be responsible for completing a summer assignment and will be assessed within the first week of school.

SS7293Z The Economics of Personal Finance

Grades 11, 12

2.5 credits

The world of personal finance can be overwhelming. From credit cards to mortgages and more, Personal Finance is here to explain the essential information you need to know to make financially smart decisions for the rest of your life. This Introduction to Personal Finance focuses on the foundations of financial planning—such as setting short-term and long-term financial goals—and then tackles essential aspects of consumer personal finance, including record keeping, budgeting, banking, saving, borrowing, investing, insurance, taxes, and retirement planning. By the end, you will feel more confident about making informed and reasoned financial choices with regard to your professional and personal lives. Your bank account will thank you later. This is a college course offered on-site at Arlington High School through a partnership with Syracuse University. All students taking the one semester class will receive a grade at the AP weight for the course on their Arlington High transcript. Additionally, students may opt to pay a nominal fee of \$336 for three SU credits. Students on free/reduced lunches can take the course for credit at a greatly reduced fee (See History Dept Head Denny Conklin). Typically, colleges will accept the Syracuse credits with a grade for transfer credit.

SS7295Z Introduction to Economics (Semester Course)

Grades 11, 12

2.5 credits

Students will engage in a study of basic micro and macro economic principles to enhance their understanding of capitalism to help them become strong citizens and make astute financial decisions. In particular they will examine the powers of the Federal Reserve and federal government as well as scrutinize the economic theories employed by Democratic and the Republican parties. Then the students will create a business to enhance their understanding of microeconomic concepts. The class concludes with an examination of the role of the consumer; here students learn personal finance life skills such as making a budget, learning wise shopping strategies, learning how to achieve a strong credit score, how to avoid credit card debt, and how to save for retirement.

**Students have the option of earning Honors Credit through more challenging research and project work*

SS7805Z Participation in Government: Public Policy (Non-SUPA) (Semester course)

Grades 10, 11, 12

2.5 credits

This course uses a collaborative, hands-on approach to give students a better understanding of how effective public policy is created. At the beginning of the semester, students will identify a social problem at the town or school level and work in groups to come up with a proposed public policy that deals with that problem. They will forecast the impact of that policy, analyze the political factors affecting the policy, and develop strategies to implement the proposed public policy. While studying their particular public policy issue, students will enhance basic research, communication, and decision-making skills and will develop a range of applied social science skills that will help them to make more informed choices as citizens, as workers, and as consumers.

**Students have the option of earning Honors Credit through more challenging research and project work.*

SS7390Z Social History Through Sports (Semester course)

Grades 10, 11, 12

2.5 credits

Students will be examine historical social issues such as race, gender, political unrest, war, and religion through the lens of sports. The course will utilize a case study approach to give students a detailed sense of the historical time period, the social issue, its relationship to a specific sport, and the legacy of the social issue/sport the continues through today. Possible topics include: breaking the color barrier (baseball), religious rights and war (boxing), racial bias & the judicial system (football), gender inequality (tennis), labor unions and strikes (baseball), and human rights (cricket and rugby). By the end of the course, students will see sports beyond fandom, competition, and athletic skill; rather they will understand how sports have functioned as both a reflection of social issues, but also a vehicle to move them forward.

** Students have the option of earning Honors Credit through more challenging research and project work.*

Still in discussion:

PE R.A.D. Basic Physical Self Defense Grades 11,12 2.5 credits

This course is designed for students who identify as female who would like to learn self defense skills. The course is led by a certified R.A.D. Instructor and pairs up with the Arlington Police Department for instructional lessons. The Cornerstone of R.A.D. Systems, this course has its foundations in education and awareness. The course includes lecture, discussion and self-defense techniques suitable for women of all ages and abilities.

PE R.A.D. for Men Grades 11,12 2.5 credits

This course is designed for students who identify as male who would like to: raise their awareness of aggressive behavior, recognize how aggressive behavior impacts their lives, learn steps to avoid aggressive behavior, consider how they can be part of reducing aggression and violence, and practice hands-on self-defense skills to resist and escape aggressive behavior directed toward them. This program is designed to empower participants to make safer choices when confronted with aggressive behavior.

Policies:

This is to be submitted to the policy team

Homeschool Students at AHS

APS policy allows students to attend selected courses at AHS with parental permission.

Homeschool students are expected to remain in good standing, abide by the code of conduct and AHS attendance policies. Specifically, this means that the student will be subject to the following expectations.

- The student will abide by the Arlington High School discipline code.
- The student will attend class every day on time in accordance with the attendance policy.
- The student will not remain on school grounds during their unscheduled time
- The student will receive an AHS transcript for grades and credits earned.

Should the conditions not be followed, Administration may revisit the student's participation in classes at AHS. If the student is eligible for special education any change in services is subject to state and federal laws governing students eligible for special education.



Town of Arlington, Massachusetts

7:45 PM Monthly Financial Report, M. Mason

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	SC_Finance_Packet_December_2018.pdf	Finance Monthly Report



Arlington Public Schools

*869 Massachusetts Avenue
Arlington, Massachusetts 02476
Telephone: 781-316-3511*

*Michael Mason, Jr.
Chief Financial Officer*

To: Arlington School Committee
From: Michael Mason
Re: Monthly Financial Reporting Packet
Date: January 24, 2019

Attached you will find a copy of the monthly financial reporting packet for the period ending 12/31/2018. There are three different reports for your review. Included are separate monthly budget tracking reports for each of the three different funding source categories: general fund (town appropriation), grants funds (state and federal), and revolving accounts.

General Fund Report

The general fund expenditure report includes spending through 12/31/2018, and is summarized by object code. You may be used to seeing this format as this is consistent with the reporting that has been used in the past. This report is a year to date budget report, created directly from Munis. Combined with columns for our projections for the remainder of the year, we arrived at the 'available budget' total that you'll find in this report. The bottom line unencumbered balance is currently projected at \$58,973. It is important to note that this does not mean that we expect there to be a surplus, but instead represents the total remaining after all known expenses at the time of this report have been encumbered.

Grant Accounts Report

The grant account report includes a year to date tracking of revenue and expenditure totals for each of our FY19 grant accounts. This report includes both federal and state grants. Currently all of these grants we included in our budget plan have been approved, and are active. Our current spending is in line with our budget plan, and we don't expect there to be any issues.

Revolving Accounts Report

The revolving account report includes year to date tracking of revenue and expenditure totals for each revolving account. The current projections are in line with the approved budget plan, and we don't expect there to be any budget issues.

Please feel free to contact the business office with any questions you may have.

Arlington Public Schools
General Fund Expenditure Report
Thru December 31, 2018

Object Description	ORIGINAL APPROPRIATION	TRANSFERS	REVISED BUDGET	YTD EXPENDED	ENCUMBRANCES	PROJECTED ENCUMBRANCES	AVAILABLE BUDGET
81111 - Administration Sal & Wages	4,865,881	17,159	4,883,040	2,413,574	2,439,354	30,000	112
81112 - Teacher Salary & Wages	36,612,317	(67,093)	36,545,224	12,947,732	22,937,112	657,547	2,834
81113 - Custodial Salaries	1,492,878	-	1,492,878	720,827	706,272	65,779	-
81114 - Food Service Salary Wages	189,615	-	189,615	81,064	-	108,551	-
81115 - Clerical Salaries	1,959,883	1,134	1,961,017	1,014,580	996,649	-	(50,212)
81116 - Full Time Teacher Aides Sal	3,437,780	28,376	3,466,156	1,423,533	1,878,033	159,689	4,901
81117 - Other Full Time Salaries	2,453,805	95,050	2,548,855	1,153,753	1,410,006	-	(14,904)
81118 - Part Time Salary Wages	152,384	-	152,384	83,075	102,446	-	(33,137)
81119 - Sped Summer School(Hardy)	175,000	-	175,000	171,637	-	-	3,363
81120 - Bus Monitors	25,000	-	25,000	3,800	-	21,200	-
81201 - Temp Salaries Professional	159,080	70,000	229,080	136,936	6,220	85,924	-
81202 - Temporary Salary Wages Other	113,500	-	113,500	62,196	-	49,600	1,704
81203 - Substitute Teachers Day To Day	266,825	-	266,825	100,468	10,523	155,600	234
81204 - Extended Term Sub Teacher	407,417	44,329	451,746	205,322	164,782	81,300	342
81205 - Student Activity Support Stip	122,448	-	122,448	2,582	134,969	-	(15,102)
81206 - Temporary Clerical Help	30,000	-	30,000	10,967	-	-	19,033
81210 - Academic Teacher Leadership	77,994	-	77,994	27,007	71,278	-	(20,291)
81215 - Administrative Stipend	71,603	-	71,603	5,853	50,744	-	15,006
81301 - Overtime Peakload Requirement	46,000	-	46,000	19,018	-	-	26,982
81302 - Cust/Snow/Ice Removal	15,000	-	15,000	2,914	-	12,086	-
81304 - Maintenance Salaries	595,642	-	595,642	202,544	177,858	215,239	-
81305 - Maint/Wk Out Of Classification	7,167	-	7,167	4,075	-	-	3,092
81307 - Permit	-	-	-	6,607	-	-	(6,607)
81308 - Out Of Classification Salary	600	-	600	9,143	-	-	(8,543)
81310 - Call Back	9,000	-	9,000	7,635	-	-	1,365
81313 - Auto Allowance	15,000	-	15,000	1,326	240	-	13,434
81314 - Custodial Clothing Allow	11,200	-	11,200	11,100	-	-	100
81316 - Custodial Absence/Vacation	50,500	-	50,500	29,697	-	20,200	603
81318 - Teacher Room Moving	8,800	-	8,800	21,108	-	-	(12,308)
81320 - Skills Stipend	2,500	-	2,500	750	750	-	1,000
81322 - Other Stipends	27,750	-	27,750	9,835	-	-	17,915
81323 - Custodial Athletic Events	15,528	-	15,528	5,151	-	10,377	-
81413 - Longevity/Teachers	415,605	-	415,605	384,058	2,648	28,500	399
81414 - Longevity Admin	14,199	-	14,199	21,341	-	-	(7,142)
81415 - Longevity Clerical	24,650	-	24,650	27,274	-	-	(2,624)
81416 - Longevity Cust	16,500	-	16,500	10,243	700	5,557	-
81730 - Pensions	2,400	-	2,400	853	2,447	-	(900)
81760 - Clothing Allowance	11,100	-	11,100	12,847	494	-	(2,241)
82103 - Power Electricity	677,654	-	677,654	458,322	141,678	77,654	-
82104 - Natural Gas	525,000	-	525,000	37,844	412,156	75,000	-
82403 - Plumbing Services	17,000	-	17,000	3,835	6,165	2,000	5,000
82404 - Roof Repairs	12,500	-	12,500	-	-	10,000	2,500
82405 - Flooring Supplies/Services	5,000	-	5,000	12,683	1,162	-	(8,846)

Arlington Public Schools
General Fund Expenditure Report
Thru December 31, 2018

Object Description	ORIGINAL APPROPRIATION	TRANSFERS	REVISED BUDGET	YTD EXPENDED	ENCUMBRANCES	PROJECTED ENCUMBRANCES	AVAILABLE BUDGET
82407 - Masonry Supply Services	5,000	-	5,000	-	-	-	5,000
82408 - Electrical Services	50,000	-	50,000	19,967	525	29,508	-
82409 - Grounds Supplies	5,000	-	5,000	1,096	-	-	3,904
82410 - Painting Services	5,000	-	5,000	7,753	247	-	(3,000)
82411 - Window Glass Service Supplies	5,000	-	5,000	5,883	530	-	(1,413)
82412 - Hvac Contracted Services	60,000	-	60,000	27,107	36,354	-	(3,461)
82414 - Boiler Contracted Services	50,000	-	50,000	27,503	2,092	19,000	1,405
82415 - Snow Removal Contracted	30,000	-	30,000	9,705	20,295	-	-
82420 - Elevator Maintenance Repairs	30,000	-	30,000	14,164	24,637	-	(8,801)
82703 - Equipment Rental	83,360	-	83,360	-	96,392	-	(13,032)
82904 - Custodial Supplies Cleaning	385,452	-	385,452	197,327	209,721	-	(21,596)
82905 - Extermination Services	2,000	-	2,000	1,150	50	-	800
82999 - Misc Maintenance Services	12,400	-	12,400	-	-	-	12,400
83101 - Professional Tech Services	844,532	-	844,532	267,717	470,350	106,400	65
83102 - Legal Services	200,000	-	200,000	67,785	72,215	-	60,000
83201 - Tuition Other Schools	6,032,929	(71,351)	5,961,578	2,005,826	2,961,997	993,755	-
83301 - Contracted Transportation	1,154,000	(69,769)	1,084,231	207,178	669,207	207,846	-
83302 - Field Trips	5,625	-	5,625	980	4,350	-	295
83303 - Otto Busing Reimburse	6,800	-	6,800	5,354	-	-	1,446
83402 - Telephone/Pagers	42,255	-	42,255	13,464	17,436	-	11,355
83403 - Advertising	6,700	-	6,700	1,929	75	-	4,696
83404 - Reproduction/Printing	21,100	-	21,100	1,203	969	-	18,928
83405 - Postage	800	-	800	-	-	-	800
83802 - Environmental Services	5,000	-	5,000	-	-	-	5,000
83803 - Security Services	14,000	-	14,000	14,581	7,537	-	(8,118)
83804 - Athletic Services	158,692	-	158,692	56,205	9,241	93,246	-
83807 - Insurance	47,856	-	47,856	46,452	-	-	1,404
83808 - Safety Equip And Testing	800	-	800	-	-	-	800
84201 - Office Supplies	86,105	-	86,105	38,279	19,898	27,500	429
84303 - Plumbing Supplies	35,000	-	35,000	24,536	2,334	7,500	630
84306 - Carpentry Supplies Doors	15,000	-	15,000	10,203	2,635	-	2,162
84308 - Electrical Supplies	25,000	-	25,000	11,710	1,009	12,000	281
84312 - Hvac Supplies	30,000	-	30,000	8,685	1,184	25,000	(4,869)
84321 - Equipment Maintenance	5,192	-	5,192	24,129	195	-	(19,133)
84802 - Motor Vehicle Repair	32,835	22,165	55,000	38,745	50,203	-	(33,948)
84803 - Gas & Oil	40,000	-	40,000	17,130	26,056	-	(3,186)
84902 - Food Supplies	39,550	-	39,550	15,751	16,594	-	7,205
85100 - Educational Supplies	3,200	-	3,200	-	4,342	-	(1,142)
85101 - Repro Paper Toner Supplies	115,034	-	115,034	48,488	13,700	50,000	2,847
85102 - Testing Materials	26,576	-	26,576	5,463	573	20,540	-
85103 - Instructional Materials	359,103	-	359,103	256,596	52,139	50,000	368
85104 - Athletic Supplies	50,653	-	50,653	37,663	14,120	-	(1,130)
85106 - Textbooks Books Periodicals	169,782	-	169,782	112,002	17,863	39,000	918

Arlington Public Schools
General Fund Expenditure Report
Thru December 31, 2018

Object Description	ORIGINAL APPROPRIATION	TRANSFERS	REVISED BUDGET	YTD EXPENDED	ENCUMBRANCES	PROJECTED ENCUMBRANCES	AVAILABLE BUDGET
85110 - Instruction Equipment	26,806	-	26,806	17,579	3,773	-	5,454
85201 - Medical Surgical Supplies	15,000	-	15,000	9,836	14,602	-	(9,437)
85802 - Computer Supplies	18,341	-	18,341	13,709	2,496	-	2,136
85803 - Graduation Service Ceremonies	15,000	-	15,000	1,920	8,333	4,747	-
85804 - Computer Software	259,377	-	259,377	249,918	4,900	-	4,559
85806 - Misc Supplies	865	-	865	333	8,860	-	(8,328)
87101 - Business Travel	6,600	-	6,600	1,544	4,135	-	921
87105 - Workshops Stipends/Green Slip	74,000	(70,000)	4,000	2,375	-	-	1,625
87106 - Graduate Course Reimbursement	25,000	-	25,000	5,959	4,444	14,597	-
87202 - Training Educ Conf & Attendanc	160,256	-	160,256	82,344	72,004	5,600	308
87301 - Professional Affiliations	49,944	-	49,944	37,708	4,287	7,900	49
87601 - Court Judgements Settlement	102,000	-	102,000	-	-	-	102,000
88501 - Capital Equipment/Furniture	6,000	-	6,000	1,621	-	4,000	379
88502 - Computer Network Telecom	480	-	480	-	-	-	480
88550 - Computer Equipment Hardware	20,317	-	20,317	860	-	18,000	1,457
88560 - Space Rental	36,000	-	36,000	-	-	36,000	-
Grand Total	66,253,022	-	66,253,022	25,940,523	36,609,586	3,643,941	58,973

Arlington Public Schools
Grant Report
Thru December 31, 2018

GRANT NAME	OBJECT DESCRIPTION	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	PROJECTED TO COMPLETION	AVAILABLE BUDGET
Metco Grant	7330 - State Revenue	(489,063)	(88,198)	-	(400,865)	-
	81111 - Administration Sal & Wages	101,352	49,454	-	51,898	-
	81112 - Teacher Salary & Wages	86,414	28,271	9,489	48,654	-
	81116 - Full Time Teacher Aides Sal	47,852	10,828	-	37,024	-
	81201 - Temp Salaries Professional	3,850	961	-	2,889	-
	81202 - Temporary Salary Wages Other	3,500	530	-	2,971	-
	83101 - Professional Tech Services	14,751	1,160	-	13,591	-
	83301 - Contracted Transportation	221,874	48,864	153,474	19,536	-
	84201 - Office Supplies	1,120	-	300	820	-
	87202 - Training Educ Conf & Attendanc	5,300	-	2,450	2,850	-
	87301 - Professional Affiliations	1,850	850	550	450	-
	88550 - Computer Equipment Hardware	1,200	-	-	1,200	-
Metco Grant Total Revenue		(489,063)	(88,198)	-	(400,865)	-
Metco Grant Total Expense		489,063	140,916	166,263	181,884	-
Special Ed Early Ed	7310 - Federal Revenue Thru State	(41,194)	(9,995)	-	(31,199)	-
	81112 - Teacher Salary & Wages	29,790	10,312	19,478	0	-
	81731 - MTRB Pension	2,681	-	-	2,681	-
	83101 - Professional Tech Services	4,350	1,300	3,050	-	-
	85100 - Educational Supplies	3,983	-	2,725	1,258	-
	87202 - Training Educ Conf & Attendanc	390	1,075	390	(1,075)	-
Special Ed Early Ed Total Revenue		(41,194)	(9,995)	-	(31,199)	-
Special Ed Early Ed Total Expense		41,194	12,686	25,643	2,865	-
Sped 94-142 Allocation	7310 - Federal Revenue Thru State	(1,492,435)	(353,562)	-	(1,138,873)	-
	81111 - Administration Sal & Wages	45,533	14,546	21,011	9,976	-
	81112 - Teacher Salary & Wages	1,237,364	440,034	742,699	54,632	-
	81201 - Temp Salaries Professional	11,266	-	-	11,266	-
	81731 - MTRB Pension	115,461	-	-	115,461	-
	83101 - Professional Tech Services	82,811	-	-	82,811	-
Sped 94-142 Allocation Total Revenue		(1,492,435)	(353,562)	-	(1,138,873)	-
Sped 94-142 Allocation Total Expense		1,492,435	454,580	763,710	274,145	-
Title I Distribution	7310 - Federal Revenue Thru State	(189,953)	(51,708)	-	(138,245)	-
	81111 - Administration Sal & Wages	5,000	5,000	-	-	-
	81112 - Teacher Salary & Wages	31,012	10,735	20,277	(0)	-
	81116 - Full Time Teacher Aides Sal	110,840	47,503	34,069	29,268	-
	81201 - Temp Salaries Professional	34,260	-	-	34,260	-
	81202 - Temporary Salary Wages Other	250	-	-	250	-
	81731 - MTRB Pension	2,791	-	-	2,791	-
	85106 - Textbooks Books Periodicals	4,000	1,412	-	2,588	-
	87105 - Workshops Stipends/Green Slip	1,800	-	-	1,800	-
Title I Distribution Total Revenue		(189,953)	(51,708)	-	(138,245)	-
Title I Distribution Total Expense		189,953	64,650	54,346	70,957	-

Arlington Public Schools
Grant Report
Thru December 31, 2018

GRANT NAME	OBJECT DESCRIPTION	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	PROJECTED TO COMPLETION	AVAILABLE BUDGET
Title IIA Improving Teacher Quality	7310 - Federal Revenue Thru State	(90,013)	(9,590)	-	(80,423)	-
	81201 - Temp Salaries Professional	48,068	150	-	47,918	-
	83101 - Professional Tech Services	15,000	7,000	7,000	1,000	-
	87203 - Title Ii Covenant Sch Training	952	-	-	952	-
	87207 - Title Ii St Agnes Training	3,825	1,500	-	2,325	-
	87208 - Title Iia-Arl Catholic	8,168	1,870	203	6,095	-
	87301 - Professional Affiliations	14,000	-	-	14,000	-
Title IIA Improving Teacher Quality Total Revenue		(90,013)	(9,590)	-	(80,423)	-
Title IIA Improving Teacher Quality Total Expense		90,013	10,520	7,203	72,290	-
TITLE III ELL	7310 - Federal Revenue Thru State	(39,258)	(3,925)	-	(35,333)	-
	81201 - Temp Salaries Professional	34,790	-	-	34,790	-
	83101 - Professional Tech Services	800	-	-	800	-
	85103 - Instructional Materials	1,668	-	-	1,668	-
	87105 - Workshops Stipends/Green Slip	2,000	-	-	2,000	-
Title III ELL Total Revenue		(39,258)	(3,925)	-	(35,333)	-
Title III ELL Total Expense		39,258	-	-	39,258	-
Grand Total Grant Revenues		(2,341,916)	(516,978)	-	(1,824,938)	-
Grand Total Grant Expenses		2,341,916	683,352	1,017,165	641,399	-

Arlington Public Schools
Revolving Account Report
Thru December 31, 2018

REVOLVING DESCRIPTION	OBJECT DESCRIPTION	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	PROJECTED TO COMPLETION	AVAILABLE BUDGET
Athletic Fees	7289 - Miscellaneous Revenue	(260,000)	(105,468.39)	-	(154,532)	-
	81202 - Temporary Salary Wages Other	260,000	145,204.14	-	114,796	-
	8300 - Contracted Services		-	-	-	-
Athletic Fees Total Revenue		(260,000)	(105,468)	-	(154,532)	-
Athletic Fees Total Expense		260,000	145,204	-	114,796	-
Athletics Ticket Sales	7289 - Miscellaneous Revenue	(40,000)	(16,818)	-	(23,182)	-
	81202 - Temporary Salary Wages Other	40,000	3,429	-	33,878	2,693
	8350 - Curriculum Supplies	-	2,693	-	-	(2,693)
Athletic Ticket Sales Total Revenue		(40,000)	(16,818)	-	(23,182)	-
Athletic Ticket Sales Total Expense		40,000	6,121	-	33,878	-
Bishop Bus Fees	7289 - Miscellaneous Revenue	(20,000)	(35,010)	-	15,010	-
	8300 - Contracted Services	20,000	1,181	-	18,819	-
Bishop Bus Total Revenue		(20,000)	(35,010)	-	15,010	-
Bishop Bus Total Expense		20,000	1,181	-	18,819	-
Building Rental Fees	7289 - Miscellaneous Revenue	(350,000)	(80,801)	-	(269,199)	-
	8092 - Custodial/Overtime	150,000	69,237	-	80,763	-
	82103 - Power/Electricity	200,000	107,308	54,947	30,496	7,249
	8300 - Contracted Services	-	5,474	-	-	(5,474)
	8350 - Curriculum Supplies	-	1,675	100	-	(1,775)
Building Rental Total Revenue		(350,000)	(80,801)	-	(269,199)	-
Building Rental Total Expense		350,000	183,695	55,047	111,258	-
Circuit Breaker	7310 - Federal Revenue Thru State	(2,317,327)	(1,393,009)	-	(924,318)	-
	83201 - Tuition Other Schools	2,317,327	728,573	1,255,796	332,958	-
Circuit Breaker Total Revenue		(2,317,327)	(1,393,009)	-	(924,318)	-
Circuit Breaker Total Expense		2,317,327	728,573	1,255,796	332,958	-
Foreign Exchange	7289 - Miscellaneous Revenue	(325,000)	(49,038)	-	(275,962)	-
	85103 - Instructional Materials	285,000	29,372	2,448	174,445	78,735
	87202 - Training Educ Conf & Attendanc	40,000	97,235	21,500	-	(78,735)
Foreign Visa Total Revenue		(325,000)	(49,038)	-	(275,962)	-
Foreign Visa Total Expense		325,000	126,607	23,948	174,445	-
Instrumental Music Fees	7289 - Miscellaneous Revenue	(148,265)	(87,699)	-	(60,566)	-
	81112 - Teacher Salary & Wages	148,265	62,438	46,184	39,643	-
Instrumental Music Total Revenue		(148,265)	(87,699)	-	(60,566)	-
Instrumental Music Total Expense		148,265	62,438	46,184	39,643	-
Menotomy Preschool	7289 - Miscellaneous Revenue	(142,000)	(184,576)	-	42,576	-
	81112 - Teacher Salary & Wages	142,000	68,834	41,654	26,548	4,965
	81116 - Full Time Teacher Aides Sal	-	4,965	-	-	(4,965)
Menotomy Preschool Total Revenue		(142,000)	(184,576)	-	42,576	-
Menotomy Preschool Total Expense		142,000	73,799	41,654	26,548	-
Peirce Field Rental	7289 - Miscellaneous Revenue	(22,000)	(22,165)	-	165	-
	81307 - Permit	-	3,738	-	-	(3,738)
	83804 - Athletic Services	22,000	6,079	610	11,573	3,738
Peirce Field Rental Total Revenue		(22,000)	(22,165)	-	165	-
Peirce Field Rental Total Expense		22,000	9,817	610	11,573	-

Arlington Public Schools
Revolving Account Report
Thru December 31, 2018

REVOLVING DESCRIPTION	OBJECT DESCRIPTION	REVISED BUDGET	YTD ACTUAL	ENCUMBRANCES	PROJECTED TO COMPLETION	AVAILABLE BUDGET
Traffic Supervisory Rebilling	7289 - Miscellaneous Revenue	(17,928)	(10,084)	-	(7,844)	-
	8350 - Curriculum Supplies	17,928	-	-	17,928	-
Traffic Supervisor Rebilling Total Revenue		(17,928)	(10,084)	-	(7,844)	-
Traffic Supervisor Rebilling Total Expense		17,928	-	-	17,928	-
Tuition In Revolving	7289 - Miscellaneous Revenue	(90,000)	(31,806)	-	(58,194)	-
	83201 - Tuition Other Schools	90,000	660	-	89,340	-
Tuition In Total Revenue		(90,000)	(31,806)	-	(58,194)	-
Tuition In Total Expense		90,000	660	-	89,340	-
AEA President Salary Offset	7289 - Miscellaneous Revenue	(15,671)	-	-	(15,671)	-
	81112 - Teacher Salary & Wages	15,671	-	-	15,671	-
AEA President Offset Total Revenue		(15,671)	-	-	(15,671)	-
AEA President Offset Total Expense		15,671	-	-	15,671	-
Total Revolving Revenue		(3,748,191)	(2,016,474)	-	(1,731,717)	-
Total Revolving Expense		3,748,191	1,338,096	1,423,238	986,857	-



Town of Arlington, Massachusetts

7:55 PM Superintendent's Report, K. Bodie

Summary:

- AHS Building Project Update
- Parmenter Cost Analysis

ATTACHMENTS:

	Type	File Name	Description
▢	Reference Material	Updated_Parmenter_Analysis_- _Cost_Factors_1-22-19.pdf	Updated Parmenter Analysis

Updated Parmenter Analysis - Cost Factors

Permanent Relocation to Parmenter		Estimated Cost to Include in New AHS	
Menotomy Pre-School			
Construction Cost	\$11,025,000	Construction Cost	\$11,200,000
Lost Rent - ACC	\$373,716	Temp Reno at Parmenter	\$2,300,000
Total	\$11,398,716	Total	\$13,500,000
District Administration			
Construction Cost	\$7,800,000	Construction Cost	\$5,800,000
Swing Space in Downs House	\$1,000,000		
Total	\$8,800,000	Total	\$5,800,000



Town of Arlington, Massachusetts

8:15 PM Consent Agenda

Summary:

- Approval of Warrant: Warrant # 19131, dated for 1/10/2019 in the amount of \$792,425.06
- Approval of Minutes: None
- Approval of Trip: Nagaokakyo, Japan trip for this July 2019.
- Approval of Trip: AHS Performing Arts New York City, May17-20 2019

ATTACHMENTS:


Type	File Name	Description
▢ Warrant	warrant_1_24_2019.pdf	warrant dated 1 10 2019
▢ Reference Material	Nagaokakyo__Japan_2019.pdf	Nagaokakyo, Japan 2019
▢ Trip Approval	NYC_MAY_2019.pdf	AHS Perm Arts NYC trip May 2019

APPROVAL OF ACCOUNTS PAYABLE

I / We certify that there is due to the vendors named within this Accounts Payable Warrant the amount set against their respective names, in payment for services performed to date.

Warrant Number	19131	Total Warrant Amount	\$792,425.06
Dated	1/10/19		

STATEMENT MADE UNDER THE PENALTIES OF PERJURY



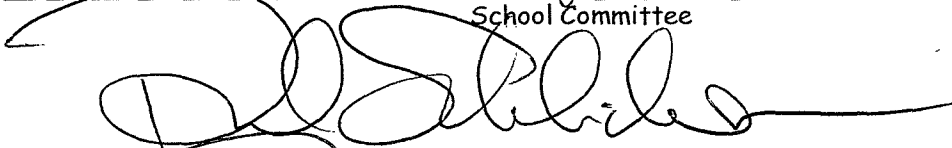
Superintendent of Schools / Chief Financial Officer



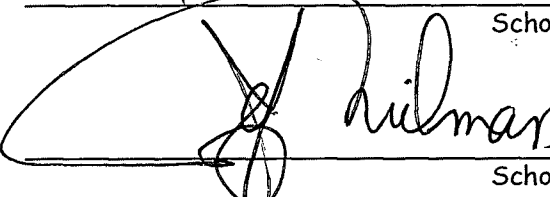
School Committee



School Committee



School Committee



School Committee

5C

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TOWN OF ARLINGTON
PRELIMINARY

TOWN OF ARLINGTON

P 1
apwarrnt

DATE: 01/10/2019 WARRANT: 19131 AMOUNT: \$ 792,425.06

PAY TO EACH OF THE PERSONS NAMED IN THE ATTACHED WARRANT THE
SUMS SET AGAINST THEIR RESPECTIVE NAMES, AMOUNTING IN THE
AGGREGATE, AND CHARGE THE SAME TO APPROPRIATIONS OR ACCOUNTS
INDICATED.

TOWN MANAGER

COMPTROLLER

01/10/2019 11:34
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TOWN OF ARLINGTON
PRELIMINARY DETAIL INVOICE LIST

P 2
apwarrnt

CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
27354	A TO Z FOODS	00000	191636	INV	01/10/2019	5698638	337394		
	1 03034309 835001			FOOD SERV	FOOD SERVI	187.50			
				Invoice Net		187.50			
				CHECK TOTAL		187.50			-----
27354	A TO Z FOODS	00000	191636	INV	01/10/2019	5698640	337395		
	1 03034309 835001			FOOD SERV	FOOD SERVI	360.00			
				Invoice Net		360.00			
27354	A TO Z FOODS	00000	191636	INV	01/10/2019	5698641	338741		
	1 03034309 835001			FOOD SERV	FOOD SERVI	225.00			
				Invoice Net		225.00			
27354	A TO Z FOODS	00000	191636	INV	01/10/2019	5698643	338742		
	1 03034309 835001			FOOD SERV	FOOD SERVI	225.00			
				Invoice Net		225.00			
27354	A TO Z FOODS	00000	191636	INV	01/10/2019	5698646	338743		
	1 03034309 835001			FOOD SERV	FOOD SERVI	375.00			
				Invoice Net		375.00			
27354	A TO Z FOODS	00000	191636	INV	01/10/2019	5698647	338744		
	1 03034309 835001			FOOD SERV	FOOD SERVI	187.50			
				Invoice Net		187.50			
				CHECK TOTAL		1,372.50			-----
31400	ABACS LLC	00000	190131	INV	01/10/2019	AAVZ25-18	338048		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	1,675.00			
				Invoice Net		1,675.00			
31400	ABACS LLC	00000	190132	INV	01/10/2019	RXRE25-18	338050		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	1,072.00			
				Invoice Net		1,072.00			
				CHECK TOTAL		2,747.00			-----
11773	ACCEPT EDUCATION COLLA	00000	191916	INV	01/10/2019	19-3167	338051		
	1 02456980 83301 3300			SPED/MILEA	TRANS	595.08			
				Invoice Net		595.08			
				CHECK TOTAL		595.08			-----
27960	AMERICAN CLASSICAL LEA	00000	193197	INV	01/10/2019	INV42129	338222		
	1 0792019 87208 2357			IMPRV ED	Training	65.00			
				Invoice Net		65.00			
				CHECK TOTAL		65.00			-----
70039	ACT, INC	00002	193528	INV	01/10/2019	32089164	338249		
	1 1953 84000			PSAT SAT A	MISC EXP	3,562.00			
				Invoice Net		3,562.00			
				CHECK TOTAL		3,562.00			-----
32432	AHOLD FINANCIAL SERVIC	00003	11485919	INV	01/10/2019	971702	337424		
	1 15124145 84902 3520			THOMPSON	FOOD SUPPL	103.16			
				Invoice Net		103.16			

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TOWN OF ARLINGTON
PRELIMINARY DETAIL INVOICE LIST

P 3
apwarrnt

CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
32432	AHOLD FINANCIAL SERVIC	00003	11485719	INV	01/10/2019	971701	337425		
	.1 15123260 84902 3520	AFT SCH		FOOD SUPPL		70.59			
		Invoice Net				70.59			
32432	AHOLD FINANCIAL SERVIC	00003	11485719	INV	01/10/2019	971704	337426		
	1 15123260 84902 3520	AFT SCH		FOOD SUPPL		37.90			
		Invoice Net				37.90			
32432	AHOLD FINANCIAL SERVIC	00003	11553819	INV	01/10/2019	886869	337427		
	1 02016518 84902 2415	FAM/CONS S		FOOD SUPPL		32.49			
		Invoice Net				32.49			
32432	AHOLD FINANCIAL SERVIC	00003	11553819	INV	01/10/2019	886874	337428		
	1 02016518 84902 2415	FAM/CONS S		FOOD SUPPL		71.27			
		Invoice Net				71.27			
32432	AHOLD FINANCIAL SERVIC	00003	11553819	INV	01/10/2019	886875	337429		
	1 02016518 84902 2415	FAM/CONS S		FOOD SUPPL		75.41			
		Invoice Net				75.41			
32432	AHOLD FINANCIAL SERVIC	00003	11553819	INV	01/10/2019	886891	337430		
	1 02016518 84902 2415	FAM/CONS S		FOOD SUPPL		83.85			
		Invoice Net				83.85			
32432	AHOLD FINANCIAL SERVIC	00003	11553819	INV	01/10/2019	886898	337431		
	1 02016518 84902 2415	FAM/CONS S		FOOD SUPPL		45.26			
		Invoice Net				45.26			
32432	AHOLD FINANCIAL SERVIC	00003	11546919	INV	01/10/2019	971708	337864		
	1 02426715 85103 2415	C&I SCIENC		INSTRUCT		13.46			
		Invoice Net				13.46			
32432	AHOLD FINANCIAL SERVIC	00003	11485619	INV	01/10/2019	886900	338508		
	1 15122260 84902 3520	HARDY GEN		HARDY FOOD		50.00			
		Invoice Net				50.00			
32432	AHOLD FINANCIAL SERVIC	00003	11485619	INV	01/10/2019	971711	338509		
	1 15122260 84902 3520	HARDY GEN		HARDY FOOD		67.40			
		Invoice Net				67.40			
32432	AHOLD FINANCIAL SERVIC	00003	11486019	INV	01/10/2019	971712	338510		
	1 15126145 84902 3520	GIBBS		FOOD SUPPL		209.33			
		Invoice Net				209.33			
32432	AHOLD FINANCIAL SERVIC	00003	11485919	INV	01/10/2019	971709	338658		
	1 15124145 84902 3520	THOMPSON		FOOD SUPPL		113.27			
		Invoice Net				113.27			
32432	AHOLD FINANCIAL SERVIC	00003	11485719	INV	01/10/2019	971720	338761		
	1 15123260 84902 3520	AFT SCH		FOOD SUPPL		55.78			
		Invoice Net				55.78			
						CHECK TOTAL	1,029.17		-----
31790	ALLARD, AVRIL	00000	11635919	INV	01/10/2019	12/3-1/4/19-PIANO	338528		
	1 14856542 83101 3520	HS INSTRUM		PROF TECH		2,872.00			
		Invoice Net				2,872.00			
						CHECK TOTAL	2,872.00		-----
30857	ALTERNATIVE TRANSPORTA	00000	191098	INV	01/10/2019	1218-ARLINGTON HS	338419		

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TOWN OF ARLINGTON
PRELIMINARY DETAIL INVOICE LIST

P 4
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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
	1 02816975 83301	3300		SPED TRANS	TRANS	504.00			
				Invoice Net		504.00			
						CHECK TOTAL	504.00		-----
74883	W.ALTON JONES CAMPUS	00002	11601719	INV	01/10/2019	2317	337432		
	1 145 8350			OUTDOOR ED	OUTDOOR ED	20,464.00			
				Invoice Net		20,464.00			
74883	W.ALTON JONES CAMPUS	00002	11601719	INV	01/10/2019	2318	337433		
	1 145 8350			OUTDOOR ED	OUTDOOR ED	340.00			
				Invoice Net		340.00			
						CHECK TOTAL	20,804.00		-----
34236	AMERICAN CHORAL DIRECT	00000	193525	INV	01/10/2019	#13616	338513		
	1 02546755 85103 2415			VISUAL/PER	INSTRUCT	125.00			
				Invoice Net		125.00			
						CHECK TOTAL	125.00		-----
70160	NATIONAL SCHOOL BOARDS	00003	11645419	INV	01/10/2019	305110-R2	337423		
	1 02576900 87301 1110			SCHOOL COM	PROF AFFLI	156.00			
				Invoice Net		156.00			
						CHECK TOTAL	156.00		-----
35990	AMI GRAPHICS INC	00000	193288	INV	01/10/2019	848164	338511		
	1 02026620 85104 3510			ATHLE/ADMI	ATHL SUPPL	61.85			
				Invoice Net		61.85			
						CHECK TOTAL	61.85		-----
36229	ANDREWS, ROBERT	00000	11619619	INV	01/10/2019	X37674	338770		
	1 02496554 85201 3200			HEALTH SRV	MED SUPPLY	136.00			
				Invoice Net		136.00			
						CHECK TOTAL	136.00		-----
28022	ANDRINA'S	00000	191637	INV	01/10/2019	370231	338319		
	1 03034309 835001			FOOD SERV	FOOD SERVI	2,430.00			
				Invoice Net		2,430.00			
						CHECK TOTAL	2,430.00		-----
35974	ANTHONY, REBECCA H.	00000	193434	INV	01/10/2019	EVENING COORDINATOR	337400		
	1 1336770 81202 6200			ADULT ED	TEMP SAL	217.50			
				Invoice Net		217.50			
						CHECK TOTAL	217.50		-----
29770	ARISE CONSULTING SERVI	00001	190121	INV	01/10/2019	CONSULT HC-DEC'18	338422		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	1,218.75			
				Invoice Net		1,218.75			
29770	ARISE CONSULTING SERVI	00001	190866	INV	01/10/2019	CONSULT NC-DEC'18	338425		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	220.00			
				Invoice Net		220.00			

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TOWN OF ARLINGTON
PRELIMINARY DETAIL INVOICE LIST

P 5
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CASH ACCOUNT: 0000

104013

VENDOR 8304

WARRANT: 19131

01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
29770	ARISE CONSULTING SERVI	00001	190867	INV	01/10/2019	CONSULT OD-DEC'18	338427		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			130.00			
		Invoice Net				130.00			
29770	ARISE CONSULTING SERVI	00001	190868	INV	01/10/2019	CONSULT ZF-DEC'18	338429		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			590.00			
		Invoice Net				590.00			
29770	ARISE CONSULTING SERVI	00001	190869	INV	01/10/2019	CONSULT YG-DEC'18	338431		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			470.00			
		Invoice Net				470.00			
29770	ARISE CONSULTING SERVI	00001	190870	INV	01/10/2019	CONSULT PG-DEC'18	338434		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			370.00			
		Invoice Net				370.00			
29770	ARISE CONSULTING SERVI	00001	190871	INV	01/10/2019	CONSULT JK-DEC'18	338436		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			720.00			
		Invoice Net				720.00			
29770	ARISE CONSULTING SERVI	00001	190873	INV	01/10/2019	CONSULT HRL-DEC'18	338438		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			610.00			
		Invoice Net				610.00			
29770	ARISE CONSULTING SERVI	00001	190874	INV	01/10/2019	CONSULT GS-DEC'18	338440		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			207.50			
		Invoice Net				207.50			
29770	ARISE CONSULTING SERVI	00001	190889	INV	01/10/2019	CONSULT LC-DEC'18	338442		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			1,145.00			
		Invoice Net				1,145.00			
29770	ARISE CONSULTING SERVI	00001	190890	INV	01/10/2019	CONSULT JL-DEC'18	338444		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			275.00			
		Invoice Net				275.00			
29770	ARISE CONSULTING SERVI	00001	190891	INV	01/10/2019	CONSULT DL-DEC'18	338445		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			1,130.00			
		Invoice Net				1,130.00			
29770	ARISE CONSULTING SERVI	00001	190892	INV	01/10/2019	CONSULT AM-DEC'18	338447		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			1,903.75			
		Invoice Net				1,903.75			
29770	ARISE CONSULTING SERVI	00001	190893	INV	01/10/2019	CONSULT AT-DEC'18	338449		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			1,220.00			
		Invoice Net				1,220.00			
29770	ARISE CONSULTING SERVI	00001	191828	INV	01/10/2019	CONSULT BD-DEC'18	338450		
	1 02456821 83101 2320	SPED/CLINI	PROF TECH			330.00			
		Invoice Net				330.00			
						CHECK TOTAL	10,540.00		-----
74880	ARLINGTON SWIFTY PRINT	00000	193607	INV	01/10/2019	139669	338250		
	1 145 8350	OUTDOOR ED	OUTDOOR ED			1,025.69			
		Invoice Net				1,025.69			
						CHECK TOTAL	1,025.69		-----
23400	ASSABET VALLEY COLLABO	00000	191770	INV	01/10/2019	191550	338052		

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TOWN OF ARLINGTON
PRELIMINARY DETAIL INVOICE LIST

P 6
apwarrnt

CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
	1 02456575 87202	2357	SPED/P.D.	TRAINING		750.00			
			Invoice Net			750.00			
						CHECK TOTAL	750.00		-----
20863 BARTHOLOMEW, ROBERT	00000 193616 INV 01/10/2019					REIMB FTBL FLAGS	338762		
1 02026626 83804 3510	ATHL/HOCKE ATHLETIC					91.20			
	Invoice Net					91.20			
						CHECK TOTAL	91.20		-----
24583 BAYSTATE INTERPRETERS,	00001 190865 INV 01/10/2019					301709	338055		
1 02456857 83101 2330	SPED CONTR PROF TECH					400.00			
	Invoice Net					400.00			
						CHECK TOTAL	400.00		-----
32102 BENCH, JENNIFER SMITH	00000 11558419 INV 01/10/2019					REIM MILEGE SCI CAMP	337434		
1 145 8350	OUTDOOR ED OUTDOOR ED					87.20			
	Invoice Net					87.20			
						CHECK TOTAL	87.20		-----
24170 THE CHILDREN'S CENTER	00000 193429 INV 01/10/2019					56084-LL	338056		
1 02456803 83101 2310	SPED/TUTOR PROF TECH					39.40			
	Invoice Net					39.40			
						CHECK TOTAL	39.40		-----
32080 BIELAK, MATTHEW	00000 INV 01/10/2019					9789	338753		
1 02026626 83804 3510	ATHL/HOCKE ATHLETIC					84.00			
	Invoice Net					84.00			
						CHECK TOTAL	84.00		-----
36270 BIRENBAUM, ROBERT	00000 INV 01/10/2019					19382	338754		
1 02026635 83804 3510	ATH/G/BB ATHLETIC					84.00			
	Invoice Net					84.00			
						CHECK TOTAL	84.00		-----
35955 BOCZENOWSKI, STACEY	00000 192039 INV 01/10/2019					STIPEND-WELLNESS	337435		
1 03092019 87208 2357	TITLE IV A Training					2,000.00			
	Invoice Net					2,000.00			
						CHECK TOTAL	2,000.00		-----
31887 BOOKSOURCE	00001 11514919 INV 01/10/2019					782195	337865		
1 02296581 85106 2410	READING IN TEXTBOOKS					448.92			
	Invoice Net					448.92			
						CHECK TOTAL	448.92		-----
22234 THE BOOK RACK	00001 11479319 INV 01/10/2019					926	338763		
1 15125145 83302 3520	BRACKETT FIELD TRIP					98.00			
	Invoice Net					98.00			

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TOWN OF ARLINGTON
PRELIMINARY DETAIL INVOICE LIST

P 7
apwarrnt

CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
22234	THE BOOK RACK		00001	11610919	INV 01/10/2019	927		338764	
	1 02246506 85103	2415	ELEM EDUC	INSTRUCT		595.00			
			Invoice Net			595.00			
22234	THE BOOK RACK		00001	193441	INV 01/10/2019	928		338765	
	1 02126506 85106	2410	ELEM EDUC	TEXTBOOKS		173.20			
			Invoice Net			173.20			
			CHECK TOTAL			866.20			-----
18495	BOSTON HIGASHI SCHOOL		00000	190661	INV 01/10/2019	1912403		338058	
	1 02456851 83201	9300	OOD RESIDE	TUITION		19,154.90			
			Invoice Net			19,154.90			
18495	BOSTON HIGASHI SCHOOL		00000	190897	INV 01/10/2019	1912412AR		338060	
	1 02456851 83201	9300	OOD RESIDE	TUITION		9,577.45			
			Invoice Net			9,577.45			
			CHECK TOTAL			28,732.35			-----
25591	BOWERS, VIRGINIA A.		00000	190118	INV 01/10/2019	12/17-12/21/18		338451	
	1 02456803 83101	2310	SPED/TUTOR	PROF TECH		550.00			
			Invoice Net			550.00			
25591	BOWERS, VIRGINIA A.		00000	190118	INV 01/10/2019	1/2/19-1/4/19		338452	
	1 02456803 83101	2310	SPED/TUTOR	PROF TECH		325.00			
	2 02456857 83101	2310	SPED CONTR	PROF TECH		125.00			
			Invoice Net			450.00			
			CHECK TOTAL			1,000.00			-----
31797	BRANDYS O'NEILL, ELZBI		00000	11636219	INV 01/10/2019	12/3-1/4/19-FLUTE		338529	
	1 14856542 83101	3520	HS INSTRUM	PROF TECH		1,864.00			
			Invoice Net			1,864.00			
			CHECK TOTAL			1,864.00			-----
23730	BROCCOLI HALL INC.		00000	190674	INV 01/10/2019	9686		338062	
	1 02456848 83201	9300	TUITION DY	TUITION		2,973.60			
			Invoice Net			2,973.60			
			CHECK TOTAL			2,973.60			-----
20939	BUCHANAN, ELIZABETH J.		00000	192575	INV 01/10/2019	DECEMBER 2018		338061	
	1 0932019 83101	2310	EARLY PART	PROF TECH		550.00			
			Invoice Net			550.00			
			CHECK TOTAL			550.00			-----
71020	CONCORD AREA SPECIAL E		00000	190811	INV 01/10/2019	19-00461		338454	
	1 02456848 83201	9400	TUITION DY	TUITION		6,823.05			
			Invoice Net			6,823.05			
71020	CONCORD AREA SPECIAL E		00000	190812	INV 01/10/2019	19-00475		338456	
	1 02456848 83201	9400	TUITION DY	TUITION		6,823.05			
			Invoice Net			6,823.05			
			CHECK TOTAL			13,646.10			-----

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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
26112	CALVARY CHURCH, UNITED	00000	193529	INV	01/10/2019	ROOM RENTL9/18-12/12	338556		
	1 1336770 82702 6200	ADULT ED	RENT FACI			2,144.75			
		Invoice Net				2,144.75			
						CHECK TOTAL	2,144.75		-----
70693	CAM OFFICE SERVICES, I	00000	11610719	INV	01/10/2019	12442	337436		
	1 02246506 85101 2430	ELEM EDUC	REPRO SUPP			207.28			
		Invoice Net				207.28			
70693	CAM OFFICE SERVICES, I	00000	190899	INV	01/10/2019	12305	338064		
	1 02456806 85101 2430	SPED ADM M	REPRO SUPP			336.00			
		Invoice Net				336.00			
						CHECK TOTAL	543.28		-----
18811	FEI THEATRES	00002	11479419	INV	01/10/2019	MARY POPPINS12/21/18	337823		
	1 15122160 83302 3520	HARDY	FIELD TRIP			504.00			
	2 15124160 83302 3520	OTTOSON	FIELD TRIP			75.60			
	3 15126145 83302 3520	GIBBS	FIELD TRIP			176.40			
		Invoice Net				756.00			
						CHECK TOTAL	756.00		-----
20737	CARING CHOICE TRANSPOR	00000	191917	INV	01/10/2019	2836	338066		
	1 02816980 83301 3300	SPED/REIMB	TRANS			4,712.50			
		Invoice Net				4,712.50			
						CHECK TOTAL	4,712.50		-----
26998	CARLSON, CHRIS	00000	192034	INV	01/10/2019	REIMB MILEGE-NOV'18	338068		
	1 02456806 87101 2110	SPED ADM M	BUS TRAVEL			154.24			
		Invoice Net				154.24			
26998	CARLSON, CHRIS	00000	192034	INV	01/10/2019	REIMB MILEGE-DEC'18	338071		
	1 02456806 87101 2110	SPED ADM M	BUS TRAVEL			211.46			
		Invoice Net				211.46			
						CHECK TOTAL	365.70		-----
70766	THE CARROLL CENTER FOR	00000	190138	INV	01/10/2019	1811036	338072		
	1 02456830 83101 2320	SPED/MEDS	PROF TECH			957.00			
		Invoice Net				957.00			
70766	THE CARROLL CENTER FOR	00000	190139	INV	01/10/2019	1811035	338073		
	1 02456830 83101 2320	SPED/MEDS	PROF TECH			1,452.00			
		Invoice Net				1,452.00			
70766	THE CARROLL CENTER FOR	00000	190140	INV	01/10/2019	1811038	338074		
	1 02456830 83101 2320	SPED/MEDS	PROF TECH			396.00			
		Invoice Net				396.00			
70766	THE CARROLL CENTER FOR	00000	191226	INV	01/10/2019	1811032	338075		
	1 02456830 83101 2320	SPED/MEDS	PROF TECH			132.00			
		Invoice Net				132.00			
70766	THE CARROLL CENTER FOR	00000	191228	INV	01/10/2019	1811033	338076		
	1 02456830 83101 2320	SPED/MEDS	PROF TECH			1,056.00			
		Invoice Net				1,056.00			

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CASH ACCOUNT: 0000 104013 VENDOR 8304

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
70766	THE CARROLL CENTER FOR	00000	191229	INV	01/10/2019	1811034	338078		
	1 02456830 83101 2320	SPED/MEDS	PROF	TECH		660.00			
		Invoice Net				660.00			
70766	THE CARROLL CENTER FOR	00000	191232	INV	01/10/2019	1811037	338079		
	1 02456830 83101 2320	SPED/MEDS	PROF	TECH		264.00			
		Invoice Net				264.00			
70766	THE CARROLL CENTER FOR	00000	191235	INV	01/10/2019	1811039	338080		
	1 02456830 83101 2320	SPED/MEDS	PROF	TECH		132.00			
		Invoice Net				132.00			
						CHECK TOTAL	5,049.00		-----
70771	CARROLL SCHOOL	00003	191969	INV	01/10/2019	2018-01	338081		
	1 02456575 87202 2357	SPED/P.D.	TRAINING			400.00			
		Invoice Net				400.00			
						CHECK TOTAL	400.00		-----
33640	EILEEN CATIZONE	00000	11610519	INV	01/10/2019	1027	338520		
	1 02246506 85103 2415	ELEM EDUC	INSTRUCT			2,125.00			
		Invoice Net				2,125.00			
						CHECK TOTAL	2,125.00		-----
24185	CENGAGE LEARNING	00001	11617219	INV	01/10/2019	65535411	337473		
	1 02036507 85106 2410	SEC EDUC	TEXTBOOKS			50.00			
		Invoice Net				50.00			
						CHECK TOTAL	50.00		-----
73222	CENTER FOR RESPONSIVE	00000	193447	INV	01/10/2019	IN3-00133934	337824		
	1 02056507 85106 2410	GIBBS TEMP	TEXTBOOKS			756.00			
		Invoice Net				756.00			
73222	CENTER FOR RESPONSIVE	00000	11622619	INV	01/10/2019	IN4-00131676	337825		
	1 02186575 87202 2357	PROF DEV	TRAINING			199.00			
		Invoice Net				199.00			
73222	CENTER FOR RESPONSIVE	00000	11591219	INV	01/10/2019	IN3-00132734	337983		
	1 15122260 85103 3520	HARDY GEN	HARDY GEN			126.00			
		Invoice Net				126.00			
						CHECK TOTAL	1,081.00		-----
20788	CENTRAL PAPER PRODUCTS	00001	191632	INV	01/10/2019	1715943	338321		
	1 03034309 835000	FOOD SERV	FOOD SERV/			242.84			
		Invoice Net				242.84			
20788	CENTRAL PAPER PRODUCTS	00001	191632	INV	01/10/2019	1717751	338322		
	1 03034309 835000	FOOD SERV	FOOD SERV/			71.78			
		Invoice Net				71.78			
20788	CENTRAL PAPER PRODUCTS	00001	191632	INV	01/10/2019	1719487	338324		
	1 03034309 835000	FOOD SERV	FOOD SERV/			783.79			
		Invoice Net				783.79			
20788	CENTRAL PAPER PRODUCTS	00001	191632	INV	01/10/2019	1719488	338326		

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CASH ACCOUNT: 0000 104013 VENDOR 8304

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
	1 03034309 835000			FOOD SERV	FOOD SERV/	808.97			
				Invoice Net		808.97			
20788	CENTRAL PAPER PRODUCTS	00001	191632	INV	01/10/2019	1719489	338327		
	1 03034309 835000			FOOD SERV	FOOD SERV/	177.09			
				Invoice Net		177.09			
20788	CENTRAL PAPER PRODUCTS	00001	191632	INV	01/10/2019	1719490	338329		
	1 03034309 835000			FOOD SERV	FOOD SERV/	1,617.44			
				Invoice Net		1,617.44			
				CHECK TOTAL		3,701.91			-----
36259	CHABAK, TERRI	00000	193606	INV	01/10/2019	REIMB LIC+PHYS	338458		
	1 02816970 87301	3300		TRANS ED	PROF AFFLI	140.00			
				Invoice Net		140.00			
				CHECK TOTAL		140.00			-----
28318	CHAN, WILLIAM	00000		INV	01/10/2019	19130	338208		
	1 02026622 83804	3510		ATHL/BASKB	ATHLETIC	62.00			
				Invoice Net		62.00			
				CHECK TOTAL		62.00			-----
34159	JAMES M. DONAHER	00001	190135	INV	01/10/2019	09-43-INT	338084		
	1 02456857 83101	2330		SPED CONTR	PROF TECH	38.76			
				Invoice Net		38.76			
34159	JAMES M. DONAHER	00001	190135	INV	01/10/2019	09-44 INT	338085		
	1 02456857 83101	2330		SPED CONTR	PROF TECH	622.56			
				Invoice Net		622.56			
34159	JAMES M. DONAHER	00001	190135	INV	01/10/2019	09-71 INT	338461		
	1 02456857 83101	2330		SPED CONTR	PROF TECH	509.16			
				Invoice Net		509.16			
34159	JAMES M. DONAHER	00001	190135	INV	01/10/2019	09-75 INT	338463		
	1 02456857 83101	2330		SPED CONTR	PROF TECH	204.00			
				Invoice Net		204.00			
				CHECK TOTAL		1,374.48			-----
26355	COLLEGE BOARD	00000	192218	INV	01/10/2019	EA81822712	337826		
	1 1953 84000			PSAT SAT A	MISC EXP	400.00			
				Invoice Net		400.00			
				CHECK TOTAL		400.00			-----
36220	CORDOVANI, ELEONORA	00000	193393	INV	01/10/2019	DRAMA/THEATRE	337402		
	1 1336780 81112	3520		KIDZONE	INSTRUCTIO	560.00			
				Invoice Net		560.00			
				CHECK TOTAL		560.00			-----
29800	CRYSTAL TRANSPORT INC	00000	193514	INV	01/10/2019	260239-B	338223		
	1 02026620 83804	3510		ATHLE/ADMI	ATHLETIC	875.00			
				Invoice Net		875.00			

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CASH ACCOUNT: 0000

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	875.00		-----
71176	D'AGOSTINO'S DELI		00001	11507219 INV	01/10/2019	16175			
	1 02606575 84902	2357	MEMBERSHIP	FOOD SUPPL		91.00	338224		
			Invoice Net			91.00			
71176	D'AGOSTINO'S DELI		00001	193183 INV	01/10/2019	16537			
	1 02016566 84902	2210	MMGT PRINC	HS FOOD		377.05	338515		
			Invoice Net			377.05			
						CHECK TOTAL	468.05		-----
36267	DIMEO, CHRISTOPHER		00000	INV	01/10/2019	REFUND LUNCH			
	1 03034309 835003		FOOD SERV	FOOD SERV/		22.20	338745		
			Invoice Net			22.20			
						CHECK TOTAL	22.20		-----
34204	ARLINGTON PIE COMPANY		00000	191640 INV	01/10/2019	493276			
	1 03034309 835001		FOOD SERV	FOOD SERVI		240.00	337397		
			Invoice Net			240.00			
34204	ARLINGTON PIE COMPANY		00000	191640 INV	01/10/2019	493277			
	1 03034309 835001		FOOD SERV	FOOD SERVI		240.00	337398		
			Invoice Net			240.00			
34204	ARLINGTON PIE COMPANY		00000	191640 INV	01/10/2019	493278			
	1 03034309 835001		FOOD SERV	FOOD SERVI		240.00	338331		
			Invoice Net			240.00			
34204	ARLINGTON PIE COMPANY		00000	191640 INV	01/10/2019	493279			
	1 03034309 835001		FOOD SERV	FOOD SERVI		464.00	338332		
			Invoice Net			464.00			
						CHECK TOTAL	1,184.00		-----
36078	DRISCOLL, WALTER A III		00000	193435 INV	01/10/2019	LEARNCHES10/18-12/6			
	1 1336770 81112 6200		ADULT ED	INSTRUCT		150.00	337405		
			Invoice Net			150.00			
						CHECK TOTAL	150.00		-----
70412	BELMONT AND CRYSTAL SP		00001	190353 INV	01/10/2019	1249889 010119			
	1 02606910 85806 1210		SUPER	MISC SUPPL		46.68	338225		
			Invoice Net			46.68			
						CHECK TOTAL	46.68		-----
70412	BELMONT AND CRYSTAL SP		00001	192165 INV	01/10/2019	1035734 121818			
	1 1952 84000		TRANSCRIPT	MISC EXPEN		19.45	338514		
			Invoice Net			19.45			
						CHECK TOTAL	19.45		-----
70412	BELMONT AND CRYSTAL SP		00001	11604519 INV	01/10/2019	1041665 010119			
	1 149 8350		CO-CURRICU	OTTOSON CO		19.45	338663		
			Invoice Net			19.45			

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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	19.45		-----
71410 EDCO				00000 190685 INV	01/10/2019	1191402			
1 02456848 83201 9400				TUITION DY TUITION		5,760.00	338087		
				Invoice Net		5,760.00			
71410 EDCO				00000 190685 INV	01/10/2019	1191496		338088	
1 02456848 83201 9400				TUITION DY TUITION		4,800.00			
				Invoice Net		4,800.00			
71410 EDCO				00000 190687 INV	01/10/2019	1191414		338089	
1 02456848 83201 9400				TUITION DY TUITION		5,760.00			
				Invoice Net		5,760.00			
71410 EDCO				00000 190687 INV	01/10/2019	1191505		338090	
1 02456848 83201 9400				TUITION DY TUITION		4,800.00			
				Invoice Net		4,800.00			
71410 EDCO				00000 192608 INV	01/10/2019	1191430		338091	
1 02456848 83201 9400				TUITION DY TUITION		5,580.00			
				Invoice Net		5,580.00			
71410 EDCO				00000 193065 INV	01/10/2019	1191406		338092	
1 02456848 83201 9400				TUITION DY TUITION		2,560.00			
				Invoice Net		2,560.00			
71410 EDCO				00000 193065 INV	01/10/2019	1191492		338093	
1 02456848 83201 9400				TUITION DY TUITION		4,800.00			
				Invoice Net		4,800.00			
71410 EDCO				00000 193236 INV	01/10/2019	1191521		338094	
1 02456848 83201 9400				TUITION DY TUITION		4,650.00			
				Invoice Net		4,650.00			
						CHECK TOTAL	38,710.00		-----
34229 EI US, LLC.				00003 190567 INV	01/10/2019	INV19239		338095	
1 02456803 83101 2310				SPED/TUTOR PROF TECH		195.75			
				Invoice Net		195.75			
34229 EI US, LLC.				00003 190567 INV	01/10/2019	INV19665		338097	
1 02456857 83101 2310				SPED CONTR PROF TECH		20.25			
				Invoice Net		20.25			
34229 EI US, LLC.				00003 190567 INV	01/10/2019	INV19666		338098	
1 02456803 83101 2310				SPED/TUTOR PROF TECH		27.00			
				Invoice Net		27.00			
34229 EI US, LLC.				00003 190567 INV	01/10/2019	INV19667		338464	
1 02456803 83101 2310				SPED/TUTOR PROF TECH		175.50			
				Invoice Net		175.50			
						CHECK TOTAL	418.50		-----
35245 ELLENBERG-DUKAS, NAOMI				00000 193535 INV	01/10/2019	KUMIHIMO WORKSHOPS		338557	
1 1336770 81112 6200				ADULT ED INSTRUCT		180.00			
				Invoice Net		180.00			
						CHECK TOTAL	180.00		-----

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CASH ACCOUNT: 0000 104013 VENDOR 8304

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
33477 ELMER, ALISON		00000	191919	INV	01/10/2019	REIMB PARKING 12/18	338660		
1 02456806 87101	2110	SPED ADM M	BUS TRAVEL			39.00			
		Invoice Net				39.00			
						CHECK TOTAL	39.00		-----
21724 FANTINI BAKING CO., IN		00000	191646	INV	01/10/2019	Q86927	338334		
1 03034309 835001		FOOD SERV	FOOD SERVI			74.18			
		Invoice Net				74.18			
21724 FANTINI BAKING CO., IN		00000	191646	INV	01/10/2019	Q86928	338335		
1 03034309 835001		FOOD SERV	FOOD SERVI			52.58			
		Invoice Net				52.58			
21724 FANTINI BAKING CO., IN		00000	191646	INV	01/10/2019	Q88121	338747		
1 03034309 835001		FOOD SERV	FOOD SERVI			115.84			
		Invoice Net				115.84			
21724 FANTINI BAKING CO., IN		00000	191646	INV	01/10/2019	Q88122	338748		
1 03034309 835001		FOOD SERV	FOOD SERVI			85.70			
		Invoice Net				85.70			
						CHECK TOTAL	328.30		-----
12894 FARR ACADEMY		00000	190654	INV	01/10/2019	IVC0005929	338102		
1 07506848 83201	9300	CB OOD DAY	TUITION			7,438.80			
		Invoice Net				7,438.80			
						CHECK TOTAL	7,438.80		-----
17536 FICARRA, RICHARD		00000		INV	01/10/2019	19014	338209		
1 02026635 83804	3510	ATH/G/BB	ATHLETIC			62.00			
		Invoice Net				62.00			
						CHECK TOTAL	62.00		-----
27740 FRANK LOCKER INC		00000	11631219	INV	01/10/2019	1253	338766		
1 02636575 87202	2357	PROF DEV	TRAINING			625.00			
		Invoice Net				625.00			
						CHECK TOTAL	625.00		-----
25201 FREY		00003	11640919	INV	01/10/2019	302500175637	337984		
1 02426715 85103	2415	C&I SCIENC	INSTRUCT			126.06			
		Invoice Net				126.06			
						CHECK TOTAL	126.06		-----
71736 THE MARGARET GIFFORD S		00000	190688	INV	01/10/2019	110188	338104		
1 07506848 83201	9300	CB OOD DAY	TUITION			5,209.05			
		Invoice Net				5,209.05			
71736 THE MARGARET GIFFORD S		00000	190689	INV	01/10/2019	110191	338106		
1 07506848 83201	9300	CB OOD DAY	TUITION			5,209.05			
		Invoice Net				5,209.05			
71736 THE MARGARET GIFFORD S		00000	190690	INV	01/10/2019	110203	338107		
1 07506848 83201	9300	CB OOD DAY	TUITION			5,209.05			
		Invoice Net				5,209.05			

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CASH ACCOUNT: 0000 104013 VENDOR 8304

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
71736	THE MARGARET GIFFORD S	00000	190691	INV	01/10/2019	110206	338108		
	1 07506848 83201 9300	CB OOD DAY	TUITION			694.54			
		Invoice Net				694.54			
71736	THE MARGARET GIFFORD S	00000	190692	INV	01/10/2019	110223	338109		
	1 07506848 83201 9300	CB OOD DAY	TUITION			5,209.05			
		Invoice Net				5,209.05			
71736	THE MARGARET GIFFORD S	00000	190693	INV	01/10/2019	120128	338110		
	1 07506848 83201 9300	CB OOD DAY	TUITION			5,209.05			
		Invoice Net				5,209.05			
		CHECK TOTAL				26,739.79			-----
28065	GILLESPIE, WALTER	00000		INV	01/10/2019	19008	338210		
	1 02026635 83804 3510	ATH/G/BB	ATHLETIC			62.00			
		Invoice Net				62.00			
		CHECK TOTAL				62.00			-----
73320	GOVCONNECTION, INC.	00001	193375	INV	01/10/2019	56396886	337827		
	1 02016507 85802 2415	SEC EDUC	COMPUTER			319.85			
		Invoice Net				319.85			
73320	GOVCONNECTION, INC.	00001	192959	INV	01/10/2019	56411531	338226		
	1 02066506 84201 2430	ELEM EDUC	OFFICE			209.00			
		Invoice Net				209.00			
		CHECK TOTAL				528.85			-----
30778	JOHN GUILFOIL PUBLIC R	00001	11507019	INV	01/10/2019	1821	337829		
	1 02606910 83101 1210	SUPER	PROF TECH			200.00			
		Invoice Net				200.00			
		CHECK TOTAL				200.00			-----
36268	HARTSTEIN, RACHEL	00000		INV	01/10/2019	REFUND LUNCH	338750		
	1 03034309 835003	FOOD SERV	FOOD SERV/			31.40			
		Invoice Net				31.40			
		CHECK TOTAL				31.40			-----
20160	HEINEMANN PROFESSIONAL	00002	11614219	INV	01/10/2019	7004911	337440		
	1 136 8350	DALLIN	DALLIN GIF			1,694.00			
		Invoice Net				1,694.00			
20160	HEINEMANN PROFESSIONAL	00002	11613119	INV	01/10/2019	6987219	337830		
	1 02306740 87202 2357	C&I ENGLIS	ENG PROF D			249.00			
		Invoice Net				249.00			
20160	HEINEMANN PROFESSIONAL	00002	11563219	INV	01/10/2019	7004908	337985		
	1 18406506 85103 2415	ELEM ED	INSTRUCT			847.00			
		Invoice Net				847.00			
20160	HEINEMANN PROFESSIONAL	00002	11578319	INV	01/10/2019	6935560	337986		
	1 02156506 85106 2410	ELEM EDUC	TEXTBOOKS			292.60			
		Invoice Net				292.60			
20160	HEINEMANN PROFESSIONAL	00002	11578319	INV	01/10/2019	6945495	337987		

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
	1 02156506 85106	2410		ELEM EDUC	TEXTBOOKS	90.75			
				Invoice Net		90.75			
20160 HEINEMANN PROFESSIONAL	00002 11638519	INV	01/10/2019			7004907	337988		
	1 02156506 85103	2415		ELEM EDUC	INSTRUCT	2,517.90			
				Invoice Net		2,517.90			
20160 HEINEMANN PROFESSIONAL	00002 192395	INV	01/10/2019			7014748	338227		
	1 02066506 85103	2415		ELEM EDUC	INSTRUCT	163.90			
				Invoice Net		163.90			
20160 HEINEMANN PROFESSIONAL	00002 11578019	INV	01/10/2019			6938196	338516		
	1 18406515 85103	2415		AHS/TEXTS	INSTRUCT	1,600.50			
				Invoice Net		1,600.50			
				CHECK TOTAL		7,455.65			-----
33923 HENNE, MIRANDA	00000 11636819	INV	01/10/2019			12/3-1/4/19-CELLO	338530		
	1 14856542 83101	3520		HS INSTRUM	PROF TECH	2,278.00			
				Invoice Net		2,278.00			
				CHECK TOTAL		2,278.00			-----
26773 HMFH ARCHITECTS, INC	00000 182543	INV	01/10/2019			2311	337437		
	1 6223778 5871			AHS STUDY	AHS STUDY	121,946.50			
				Invoice Net		121,946.50			
26773 HMFH ARCHITECTS, INC	00000 182543	INV	01/10/2019			2312	337438		
	1 6223778 5871			AHS STUDY	AHS STUDY	7,158.90			
				Invoice Net		7,158.90			
26773 HMFH ARCHITECTS, INC	00000 182543	INV	01/10/2019			2313	337439		
	1 6223778 5871			AHS STUDY	AHS STUDY	1,056.64			
				Invoice Net		1,056.64			
				CHECK TOTAL		130,162.04			-----
36225 HOFFMAN, HEIDI LYNN	00000 11619719	INV	01/10/2019			017-26	337828		
	1 02496554 85201	3200		HEALTH SRV	MED SUPPLY	2,325.00			
				Invoice Net		2,325.00			
				CHECK TOTAL		2,325.00			-----
32110 HUGHES, CHRISTINA	00000 11558519	INV	01/10/2019			REIM MILEGE SCI CAMP	337441		
	1 145 8350			OUTDOOR ED	OUTDOOR ED	87.20			
				Invoice Net		87.20			
				CHECK TOTAL		87.20			-----
36177 INSTITUTE FOR MULTI SE	00000 193055	INV	01/10/2019			59663	338518		
	1 0942018 83101	2357		SPED 142	PROF TECH	1,175.00			
				Invoice Net		1,175.00			
36177 INSTITUTE FOR MULTI SE	00000 193055	INV	01/10/2019			59411	338519		
	1 0942018 83101	2357		SPED 142	PROF TECH	237.55			
				Invoice Net		237.55			
				CHECK TOTAL		1,412.55			-----

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
33973	K AND C MUSIC CO	00000	192265	INV	01/10/2019	1166	338521		
	1 02546755 83101 2420		VISUAL/PER	PROF TECH		1,595.00			
			Invoice Net			1,595.00			
						CHECK TOTAL	1,595.00		-----
31794	KOBAYASHI-KIRKER,KAEDE	00000	11636319	INV	01/10/2019	12/3-1/4/19-VIOLIN	338531		
	1 14856542 83101 3520		HS INSTRUM	PROF TECH		2,432.00			
			Invoice Net			2,432.00			
						CHECK TOTAL	2,432.00		-----
36243	KOUZOUIAN, ALINA OVSAN	00000	193536	INV	01/10/2019	TEEN AIDE 9/25-12/6	338558		
	1 1336770 81202 6200		ADULT ED	TEMP SAL		253.00			
			Invoice Net			253.00			
						CHECK TOTAL	253.00		-----
72363	LABBB COLLABORATIVE	00000	190813	INV	01/10/2019	11L1052115	338112		
	1 02456848 83201 9400		TUITION DY	TUITION		5,652.12			
			Invoice Net			5,652.12			
72363	LABBB COLLABORATIVE	00000	190814	INV	01/10/2019	11L1027656	338114		
	1 02456848 83201 9400		TUITION DY	TUITION		5,652.12			
			Invoice Net			5,652.12			
72363	LABBB COLLABORATIVE	00000	190815	INV	01/10/2019	11V1037656	338115		
	1 02456848 83201 9400		TUITION DY	TUITION		4,746.60			
			Invoice Net			4,746.60			
72363	LABBB COLLABORATIVE	00000	190816	INV	01/10/2019	11L1015648	338117		
	1 02456848 83201 9400		TUITION DY	TUITION		5,652.12			
			Invoice Net			5,652.12			
72363	LABBB COLLABORATIVE	00000	190817	INV	01/10/2019	11V1085645	338118		
	1 02456848 83201 9400		TUITION DY	TUITION		5,010.30			
			Invoice Net			5,010.30			
72363	LABBB COLLABORATIVE	00000	190818	INV	01/10/2019	11V1088492	338120		
	1 02456848 83201 9400		TUITION DY	TUITION		5,010.30			
			Invoice Net			5,010.30			
72363	LABBB COLLABORATIVE	00000	190819	INV	01/10/2019	11V1088420	338121		
	1 02456848 83201 9400		TUITION DY	TUITION		5,010.30			
			Invoice Net			5,010.30			
72363	LABBB COLLABORATIVE	00000	190820	INV	01/10/2019	11L1025229	338122		
	1 02456848 83201 9400		TUITION DY	TUITION		5,652.12			
			Invoice Net			5,652.12			
72363	LABBB COLLABORATIVE	00000	190821	INV	01/10/2019	11V1062810	338123		
	1 02456848 83201 9400		TUITION DY	TUITION		5,010.30			
			Invoice Net			5,010.30			
72363	LABBB COLLABORATIVE	00000	190822	INV	01/10/2019	11L1055661	338124		
	1 02456848 83201 9400		TUITION DY	TUITION		5,652.12			
			Invoice Net			5,652.12			
72363	LABBB COLLABORATIVE	00000	190823	INV	01/10/2019	11V1067483	338125		
	1 02456848 83201 9400		TUITION DY	TUITION		4,746.60			
			Invoice Net			4,746.60			

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
72363	LABBB COLLABORATIVE	00000	190824	INV	01/10/2019	11BI103583	338126		
	1 02456848 83201 9400			TUITION DY	TUITION	5,229.56			
				Invoice Net		5,229.56			
72363	LABBB COLLABORATIVE	00000	190826	INV	01/10/2019	11V1094115	338127		
	1 02456848 83201 9400			TUITION DY	TUITION	5,010.30			
				Invoice Net		5,010.30			
72363	LABBB COLLABORATIVE	00000	190827	INV	01/10/2019	11L1033458	338128		
	1 02456848 83201 9400			TUITION DY	TUITION	5,652.12			
				Invoice Net		5,652.12			
72363	LABBB COLLABORATIVE	00000	190828	INV	01/10/2019	11L1015003	338129		
	1 02456848 83201 9400			TUITION DY	TUITION	5,652.12			
				Invoice Net		5,652.12			
72363	LABBB COLLABORATIVE	00000	190829	INV	01/10/2019	11BI104820	338131		
	1 02456848 83201 9400			TUITION DY	TUITION	5,229.56			
				Invoice Net		5,229.56			
72363	LABBB COLLABORATIVE	00000	190830	INV	01/10/2019	11V1076902	338132		
	1 02456848 83201 9400			TUITION DY	TUITION	5,010.30			
				Invoice Net		5,010.30			
72363	LABBB COLLABORATIVE	00000	190831	INV	01/10/2019	11V1070115	338133		
	1 02456848 83201 9400			TUITION DY	TUITION	4,746.60			
				Invoice Net		4,746.60			
72363	LABBB COLLABORATIVE	00000	192132	INV	01/10/2019	11HS10276	338134		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	915.00			
				Invoice Net		915.00			
72363	LABBB COLLABORATIVE	00000	192133	INV	01/10/2019	11HS10376	338135		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	490.00			
				Invoice Net		490.00			
72363	LABBB COLLABORATIVE	00000	192134	INV	01/10/2019	11HS10358	338136		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	1,060.00			
				Invoice Net		1,060.00			
72363	LABBB COLLABORATIVE	00000	192135	INV	01/10/2019	11HSCM	338137		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	180.00			
				Invoice Net		180.00			
72363	LABBB COLLABORATIVE	00000	192136	INV	01/10/2019	11HS10482	338140		
	1 02456821 83101 2320			SPED/CLINI	PROF TECH	440.00			
				Invoice Net		440.00			
72363	LABBB COLLABORATIVE	00000	192144	INV	01/10/2019	11L1025331a	338141		
	1 02456848 83201 9400			TUITION DY	TUITION	5,652.12			
				Invoice Net		5,652.12			
72363	LABBB COLLABORATIVE	00000	192203	INV	01/10/2019	11BM1035832	338142		
	1 02816980 83301 3300			SPED/REIMB	TRANS	323.00			
				Invoice Net		323.00			
72363	LABBB COLLABORATIVE	00000	192204	INV	01/10/2019	11BM1048202	338144		
	1 02816980 83301 3300			SPED/REIMB	TRANS	484.50			
				Invoice Net		484.50			
72363	LABBB COLLABORATIVE	00000	192205	INV	01/10/2019	11BM1027656	338145		
	1 02816980 83301 3300			SPED/REIMB	TRANS	969.00			
				Invoice Net		969.00			

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
72363	LABBB COLLABORATIVE	00000	192207	INV	01/10/2019	11MI100900	338146		
	1 02456848 83201 9400			TUITION DY	TUITION	2,637.00			
				Invoice Net		2,637.00			
72363	LABBB COLLABORATIVE	00000	192684	INV	01/10/2019	11BM1025331	338147		
	1 02816980 83301 3300			SPED/REIMB	TRANS	969.00			
				Invoice Net		969.00			
72363	LABBB COLLABORATIVE	00000	193066	INV	01/10/2019	11MI109458	338148		
	1 02456848 83201 9400			TUITION DY	TUITION	1,318.50			
				Invoice Net		1,318.50			
72363	LABBB COLLABORATIVE	00000	193067	INV	01/10/2019	11V1083306a	338149		
	1 02456848 83201 9400			TUITION DY	TUITION	791.10			
				Invoice Net		791.10			
				CHECK TOTAL		110,554.78			-----
33075	LAMONICA, MARTIN	00000	193531	INV	01/10/2019	INFO LITERACY 11/14	338560		
	1 1336770 81112 6200			ADULT ED	INSTRUCT	37.50			
				Invoice Net		37.50			
				CHECK TOTAL		37.50			-----
72376	LANDMARK FOUNDATION, I	00000	190696	INV	01/10/2019	30542	338466		
	1 07506848 83201 9300			CB OOD DAY	TUITION	4,856.32			
				Invoice Net		4,856.32			
72376	LANDMARK FOUNDATION, I	00000	190697	INV	01/10/2019	31864	338468		
	1 07506848 83201 9300			CB OOD DAY	TUITION	3,278.05			
				Invoice Net		3,278.05			
72376	LANDMARK FOUNDATION, I	00000	190698	INV	01/10/2019	31542	338470		
	1 07506848 83201 9300			CB OOD DAY	TUITION	2,185.37			
				Invoice Net		2,185.37			
				CHECK TOTAL		10,319.74			-----
12476	LANGUAGE CIRCLE ENTERP	00000	11610219	INV	01/10/2019	18121802	338522		
	1 02246506 85103 2415			ELEM EDUC	INSTRUCT	484.00			
				Invoice Net		484.00			
				CHECK TOTAL		484.00			-----
32103	LARP ADVENTURE PROGRAM	00001	11617319	INV	01/10/2019	0416	337442		
	1 149 7289			CO-CURRICU	MISC REV	4,050.00			
				Invoice Net		4,050.00			
				CHECK TOTAL		4,050.00			-----
19990	LATHAM CENTERS, INC	00000	190669	INV	01/10/2019	037477	338472		
	1 02456851 83201 9300			OOD RESIDE	TUITION	20,191.23			
				Invoice Net		20,191.23			
				CHECK TOTAL		20,191.23			-----
72433	LEAGUE SCHOOL OF GREAT	00000	190699	INV	01/10/2019	004623	338150		
	1 07506848 83201 9300			CB OOD DAY	TUITION	5,887.50			
				Invoice Net		5,887.50			

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	5,887.50		-----
36226	LEARN LAUNCH INC		00000 11647419	INV	01/10/2019	20181210	337443		
	1 02636575 87202	2357	PROF DEV	TRAINING		135.00			
			Invoice Net			135.00			
						CHECK TOTAL	135.00		-----
72441	LEARNING PREP SCHOOL I		00001 190701	INV	01/10/2019	52886-AD	338151		
	1 07506848 83201	9300	CB OOD DAY	TUITION		2,133.04			
			Invoice Net			2,133.04			
72441	LEARNING PREP SCHOOL I		00001 190702	INV	01/10/2019	52886-CM	338152		
	1 07506848 83201	9300	CB OOD DAY	TUITION		2,566.66			
			Invoice Net			2,566.66			
72441	LEARNING PREP SCHOOL I		00001 190703	INV	01/10/2019	52886-NW	338153		
	1 02456848 83201	9300	TUITION DY	TUITION		2,836.95			
			Invoice Net			2,836.95			
						CHECK TOTAL	7,536.65		-----
35962	LEON, ALEXANDER		00000	INV	01/10/2019	19432	338211		
	1 02026622 83804	3510	ATHL/BASKB	ATHLETIC		50.00			
			Invoice Net			50.00			
35962	LEON, ALEXANDER		00000	INV	01/10/2019	19414	338212		
	1 02026640 83804	3510	ATH/G/I.H.	ATHLETIC		50.00			
			Invoice Net			50.00			
35962	LEON, ALEXANDER		00000	INV	01/10/2019	19289	338213		
	1 02026622 83804	3510	ATHL/BASKB	ATHLETIC		50.00			
	2 02026635 83804	3510	ATH/G/BB	ATHLETIC		50.00			
			Invoice Net			100.00			
						CHECK TOTAL	200.00		-----
36217	LEWIS, CINDY ANNE		00000 193436	INV	01/10/2019	ESSENTRICS10/4-11/28	337407		
	1 1336770 81112	6200	ADULT ED	INSTRUCT		100.00			
			Invoice Net			100.00			
						CHECK TOTAL	100.00		-----
36027	LIANG, LI-MEI		00000 11636119	INV	01/10/2019	12/3/-1/4/19-VIOLIN	338532		
	1 14856542 83101	3520	HS INSTRUM	PROF TECH		1,544.00			
			Invoice Net			1,544.00			
						CHECK TOTAL	1,544.00		-----
75093	LIGHTHOUSE SCHOOL INC		00000 190712	INV	01/10/2019	1218003-JJJ	338154		
	1 07506848 83201	9300	CB OOD DAY	TUITION		6,153.75			
			Invoice Net			6,153.75			
75093	LIGHTHOUSE SCHOOL INC		00000 191237	INV	01/10/2019	1218003-PG	338155		
	1 02456848 83201	9300	TUITION DY	TUITION		6,153.75			
			Invoice Net			6,153.75			
						CHECK TOTAL	12,307.50		-----

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
35351	LOCAL MOTION INC 1 145 8350	00000	11601619	INV	01/10/2019	100076 805.04 805.04 Invoice Net	338229		
35351	LOCAL MOTION INC 1 145 8350	00000	11601619	INV	01/10/2019	100077 805.04 805.04 Invoice Net	338230		
35351	LOCAL MOTION INC 1 145 8350	00000	11601619	INV	01/10/2019	100078 805.04 805.04 Invoice Net	338232		
35351	LOCAL MOTION INC 1 145 8350	00000	11601619	INV	01/10/2019	100079 805.04 805.04 Invoice Net	338233		
						CHECK TOTAL	3,220.16		-----
36269	LOK-MANO, MANDY 1 02026635 83804	3510	00000	ATH/G/BB	INV 01/10/2019 ATHLETIC	19471 84.00 84.00 Invoice Net	338755		
						CHECK TOTAL	84.00		-----
36271	MADDEN, COLBY 1 02026622 83804	3510	00000	ATHL/BASKB	INV 01/10/2019 ATHLETIC	19288 50.00 50.00 Invoice Net	338756		
						CHECK TOTAL	50.00		-----
28859	MAGLIOCCA, BRYAN 1 02456839 87101	2315	00000	192035	INV 01/10/2019 TEAM CHAIR BUS TRAVEL	REIM MILEGE-DEC'18 114.43 114.43 Invoice Net	338156		
						CHECK TOTAL	114.43		-----
72639	MAL'S 1 02816970 84802	3300	00002	192963	INV 01/10/2019 TRANS ED VEHICLE RE	08872 405.00 405.00 Invoice Net	338157		
						CHECK TOTAL	405.00		-----
35973	MARADIAGA, RYAN J. 1 1336770 81202	6200	00000	193392	INV 01/10/2019 ADULT ED TEMP SAL	CULINARY AIDE 306.00 306.00 Invoice Net	337409		
						CHECK TOTAL	306.00		-----
29812	MARKET BASKET 1 02016518 84902	2415	00001	11568019	INV 01/10/2019 FAM/CONS S FOOD SUPPL	#2001540004-DEC'18 40.65 40.65 Invoice Net	337445		
						CHECK TOTAL	40.65		-----
29812	MARKET BASKET 1 02036507 85103	2415	00001	11543619	INV 01/10/2019 SEC EDUC INSTRUCT	NOV'18-OMS 104.51 104.51 Invoice Net	337449		

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	104.51		-----
19550 MASSACHUSETTS MUNICIPAL	00000 11646019 INV	01/10/2019				MMA 29442	337831		
1 02636935 83403 1420	HUMAN RES/ ADS					75.00			
	Invoice Net					75.00			
						CHECK TOTAL	75.00		-----
35095 MASSACHUSETTS 4-H FOUN	00000 193534 INV	01/10/2019				BABYSITTING BASICS	338561		
1 1336775 81112 6200	SUMMER FUN TEACHER SA					400.00			
	Invoice Net					400.00			
						CHECK TOTAL	400.00		-----
72575 MASS BAY TRANSPORTATIO	00003 192201 INV	01/10/2019				303058	337833		
1 1322019 83301 3300	METCO 2019 TRANS					1,200.00			
	Invoice Net					1,200.00			
						CHECK TOTAL	1,200.00		-----
31016 MCGOWAN, REBECCA	00000 193391 INV	01/10/2019				IRISH STEP10/4-11/29	337410		
1 1336780 81112 3520	KIDZONE INSTRUCTIO					320.00			
	Invoice Net					320.00			
						CHECK TOTAL	320.00		-----
72813 MCLEAN HOSPITAL	00001 190704 INV	01/10/2019				IN01359118	338158		
1 07506848 83201 9300	CB OOD DAY TUITION					5,378.85			
	Invoice Net					5,378.85			
72813 MCLEAN HOSPITAL	00001 191110 INV	01/10/2019				IN01359117	338159		
1 02456848 83201 9300	TUITION DY TUITION					5,378.85			
	Invoice Net					5,378.85			
						CHECK TOTAL	10,757.70		-----
27022 MELLO, ROBERT	00000 INV	01/10/2019				19380	338214		
1 02026635 83804 3510	ATH/G/BB ATHLETIC					62.00			
	Invoice Net					62.00			
27022 MELLO, ROBERT	00000 INV	01/10/2019				19411	338757		
1 02026635 83804 3510	ATH/G/BB ATHLETIC					62.00			
	Invoice Net					62.00			
						CHECK TOTAL	124.00		-----
15684 MELMARK NEW ENGLAND	00001 190659 INV	01/10/2019				0026392-IN	338475		
1 02456845 83201 9300	OOD/AIDE TUITION					1,977.80			
2 02456851 83201 9300	OOD RESIDE TUITION					11,519.60			
	Invoice Net					13,497.40			
						CHECK TOTAL	13,497.40		-----
72872 METCO, INC.	00000 192202 INV	01/10/2019				PAYMENT #2-FY'19	337834		
1 1322019 83301 3300	METCO 2019 TRANS					40,950.00			
	Invoice Net					40,950.00			

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CASH ACCOUNT: 0000

104013

VENDOR 8304

WARRANT: 19131

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	40,950.00		-----
22727	MILESTONES, INC.					24637			
	1 07506848 83201 9300	00000	190673	INV	01/10/2019	3,292.43	338160		
			CB OOD DAY	TUITION		3,292.43			
			Invoice Net						
						CHECK TOTAL	3,292.43		-----
26382	MASSACHUSETTS MUSIC ED					42745			
	1 02546755 83302 2440	00000	193054	INV	01/10/2019	300.00	337832		
			VISUAL/PER	FIELD TRIP		300.00			
			Invoice Net						
						CHECK TOTAL	300.00		-----
31795	MURADYAN, LILIT					12/3-1/4/19			
	1 14856542 83101 3520	00000	11637119	INV	01/10/2019	1,164.00	338533		
			HS INSTRUM	PROF TECH		1,164.00			
			Invoice Net						
						CHECK TOTAL	1,164.00		-----
73039	MUSIC IN MOTION					00726255			
	1 02186506 85103 2415	00000	11221119	INV	01/10/2019	216.93	338781		
			ELEM EDUC	INSTRUCT		216.93			
			Invoice Net						
						CHECK TOTAL	216.93		-----
34176	NATIONAL ASSOC FOR MUS					1737810			
	1 02546755 85103 2415	00000	193524	INV	01/10/2019	159.00	338234		
			VISUAL/PER	INSTRUCT		159.00			
			Invoice Net						
						CHECK TOTAL	159.00		-----
31791	NERKARARYAN, KNARIK					12/3/1/4/19-VOICE			
	1 14856542 83101 3520	00000	11636619	INV	01/10/2019	1,500.00	338534		
			HS INSTRUM	PROF TECH		1,500.00			
			Invoice Net						
						CHECK TOTAL	1,500.00		-----
33157	NEW ENGLAND ICE CREAM					5581836110			
	1 03034309 835001	00001	191639	INV	01/10/2019	163.95	338338		
			FOOD SERV	FOOD SERVI		163.95			
			Invoice Net						
						CHECK TOTAL	163.95		-----
24772	NEW ENGLAND ACADEMY,LL					ARL1218C			
	1 07506848 83201 9300	00000	190675	INV	01/10/2019	4,798.05	338161		
			CB OOD DAY	TUITION		4,798.05			
			Invoice Net						
24772	NEW ENGLAND ACADEMY,LL					ARL1218K			
	1 07506848 83201 9300	00000	190676	INV	01/10/2019	4,798.05	338162		
			CB OOD DAY	TUITION		4,798.05			
			Invoice Net						
24772	NEW ENGLAND ACADEMY,LL					ARL1218			
	1 02456848 83201 9300	00000	190677	INV	01/10/2019	4,798.05	338163		
			TUITION DY	TUITION		4,798.05			
			Invoice Net						
24772	NEW ENGLAND ACADEMY,LL					ARL1218W			
		00000	190678	INV	01/10/2019		338164		

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CASH ACCOUNT: 0000

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
1	02456848 83201	9300		TUITION DY Invoice Net	TUITION	4,798.05 4,798.05 CHECK TOTAL			19,192.20 -----
28922	NEW YORK TIMES 1 02016563 85106	2410		00001 11418219 INV LIBRARY/ME TEXTBOOKS Invoice Net	01/10/2019	11/26/18-12/23/18 22.00 22.00	337837		
28922	NEW YORK TIMES 1 02016563 85106	2410		00001 11418219 INV LIBRARY/ME TEXTBOOKS Invoice Net	01/10/2019	12/24/18-1/20/19 22.00 22.00 CHECK TOTAL	337838		44.00 -----
16252	NORTH READING TRANSPOR 1 02816980 83301	3300		00000 192607 INV SPED/REIMB TRANS Invoice Net	01/10/2019	23918 843.75 843.75 CHECK TOTAL	338165		843.75 -----
21363	NORTH SUBURBAN TRANSPOR 1 149 8350			00000 11617019 INV CO-CURRICU OTTOSON CO Invoice Net	01/10/2019	9630 1,320.00 1,320.00 CHECK TOTAL	337475		1,320.00 -----
11725	NORTON, MICHAEL 1 02026626 83804	3510		00000 ATHL/HOCKE ATHLETIC Invoice Net	01/10/2019	19286 84.00 84.00	338215		
11725	NORTON, MICHAEL 1 02026640 83804	3510		00000 ATH/G/I.H. ATHLETIC Invoice Net	01/10/2019	19280 84.00 84.00 CHECK TOTAL	338216		168.00 -----
12512	NSTA 1 0792019 87208	2357		00005 193314 INV IMPRV ED Training Invoice Net	01/10/2019	4191564 138.00 138.00 CHECK TOTAL	337836		138.00 -----
36219	NUNNA, MADHAVI 1 1336770 81112	6200		00000 193437 INV ADULT ED INSTRUCT Invoice Net	01/10/2019	YOGA-PEIRCE 320.00 320.00 CHECK TOTAL	337412		320.00 -----
36255	OFFIT, ADAM 1 02026620 83804	3510		00000 193621 INV ATHLE/ADMI ATHLETIC Invoice Net	01/10/2019	REIMB COACHES COURSE 98.00 98.00 CHECK TOTAL	338767		98.00 -----
32803	MAKING THE JUMP LLC 1 15126145 83302	3520		00000 11590019 INV GIBBS FIELD TRIP Invoice Net	01/10/2019	2018-1534 400.00 400.00	337444		

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CASH ACCOUNT: 0000 104013 VENDOR 8304

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	400.00		-----
73370 PASCO SCIENTIFIC	1 02426715 85103	2415	00000 11641219	INV INSTRUCT	01/10/2019	18IN019889 523.00 523.00	337867		
						CHECK TOTAL	523.00		-----
36028 PAXSON, MARK	1 14856542 83101	3520	00000 11636519	INV PROF TBCH	01/10/2019	12/3-1/4/19-VIOLIN 833.00 833.00	338535		
						CHECK TOTAL	833.00		-----
26067 NCS PEARSON, INC	1 02456836 85102	2800	00001 193193	INV TESTING	01/10/2019	11917789 573.30 573.30	338166		
						CHECK TOTAL	573.30		-----
73408 PERKINS SCHOOL FOR THE	1 02456851 83201	9300	00000 190705	INV TUITION	01/10/2019	069060 19,796.27 19,796.27	338167		
73408 PERKINS SCHOOL FOR THE	1 02456851 83201	9300	00000 190706	INV TUITION	01/10/2019	069111 17,672.20 17,672.20	338168		
73408 PERKINS SCHOOL FOR THE	1 02456848 83201	9300	00000 190707	INV TUITION	01/10/2019	069170 8,836.10 8,836.10	338169		
73408 PERKINS SCHOOL FOR THE	1 02456848 83201	9300	00000 190708	INV TUITION	01/10/2019	069175 7,231.51 7,231.51	338174		
73408 PERKINS SCHOOL FOR THE	1 02456848 83201	9300	00000 190708	INV TUITION	01/10/2019	DEC-2018-AV 462.80 462.80	338175		
						CHECK TOTAL	53,998.88		-----
31308 SCIENCE TELLERS	1 15123160 83302	3520	00001 11592219	INV FIELD TRIP	01/10/2019	8847 400.00 400.00	337460		
						CHECK TOTAL	400.00		-----
73471 PLAY TIME, INC.	1 15123260 85103	3520	00000 11485219	INV GENERAL	01/10/2019	5199 41.82 41.82	337450		
73471 PLAY TIME, INC.	1 15122260 85103	3520	00000 11485119	INV HARDY GEN	01/10/2019	5198 101.71 101.71	337839		
						CHECK TOTAL	143.53		-----

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
23066	PORTLAND POTTERY SOUTH	00000	192686	INV	01/10/2019	319828	338523		
	1 02546750 85103 2415		VISUAL/ART	INSTRUCT		379.75			
			Invoice Net			379.75			
23066	PORTLAND POTTERY SOUTH	00000	192686	INV	01/10/2019	316348	338524		
	1 02546750 85103 2415		VISUAL/ART	INSTRUCT		21.15			
			Invoice Net			21.15			
			CHECK TOTAL			400.90			-----
30974	PRIMETIME SPORTS INC	00000	191971	INV	01/10/2019	20847	337451		
	1 02026635 85104 3510		ATH/G/BB	ATHL SUPPL		4,992.00			
			Invoice Net			4,992.00			
			CHECK TOTAL			4,992.00			-----
32480	QUENCH USA, INC.	00002	190350	INV	01/10/2019	INV01564371	337840		
	1 152 8300		BLDG USER	CONT/SERV		104.98			
			Invoice Net			104.98			
32480	QUENCH USA, INC.	00002	190349	INV	01/10/2019	INV01569263	337841		
	1 152 8300		BLDG USER	CONT/SERV		38.00			
	2 177 8300		APSCP	CONT/SERV		19.00			
			Invoice Net			57.00			
			CHECK TOTAL			161.98			-----
32894	QUINLAN, BRAEDON	00000		INV	01/10/2019	19418	338218		
	1 02026620 83804 3510		ATHLE/ADMI	ATHLETIC		110.00			
			Invoice Net			110.00			
32894	QUINLAN, BRAEDON	00000		INV	01/10/2019	19385	338758		
	1 02026626 83804 3510		ATHL/HOCKE	ATHLETIC		33.00			
			Invoice Net			33.00			
			CHECK TOTAL			143.00			-----
73878	R.W. SHATTUCK & CO INC	00000	11594419	INV	01/10/2019	205627/1	338768		
	1 02016507 85103 2415		SEC EDUC	INSTRUCT		11.70			
			Invoice Net			11.70			
73878	R.W. SHATTUCK & CO INC	00000	11594419	INV	01/10/2019	205718/1	338769		
	1 02016507 85103 2415		SEC EDUC	INSTRUCT		27.98			
			Invoice Net			27.98			
			CHECK TOTAL			39.68			-----
14467	REALLY GOOD STUFF, INC	00001	11563019	INV	01/10/2019	6709402	337989		
	1 02156506 85103 2415		ELEM EDUC	INSTRUCT		349.40			
			Invoice Net			349.40			
14467	REALLY GOOD STUFF, INC	00001	11563019	INV	01/10/2019	6755089	337990		
	1 02156506 85103 2415		ELEM EDUC	INSTRUCT		247.91			
			Invoice Net			247.91			
14467	REALLY GOOD STUFF, INC	00001	11563019	INV	01/10/2019	6783291	337991		
	1 02156506 85103 2415		ELEM EDUC	INSTRUCT		35.82			
			Invoice Net			35.82			

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CASH ACCOUNT: 0000

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WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	633.13		-----
32721	RICCIO,MEGAN		00000	11636919	INV 01/10/2019	12/3-1/4/19-FR HORN	338536		
	1 14856542 83101	3520	HS INSTRUM	PROF TECH		336.00			
			Invoice Net			336.00			
						CHECK TOTAL	336.00		-----
36141	RIVER DELL REGIONAL SC		00000	11616819	INV 01/10/2019	QUIZ BOWL -12/1/18	337452		
	1 02036507 85103	2415	SEC EDUC	INSTRUCT		80.00			
			Invoice Net			80.00			
						CHECK TOTAL	80.00		-----
36273	RUSSELL, JEFF		00000		INV 01/10/2019	19062	338759		
	1 02026626 83804	3510	ATHL/HOCKE	ATHLETIC		62.00			
			Invoice Net			62.00			
						CHECK TOTAL	62.00		-----
23093	A. RUSSO & SONS, INC.		00000	11486419	INV 01/10/2019	544629	337842		
	1 15122260 84902	3520	HARDY GEN	HARDY FOOD		200.00			
			Invoice Net			200.00			
23093	A. RUSSO & SONS, INC.		00000	11486319	INV 01/10/2019	547870	338235		
	1 15123260 85103	3520	AFT SCH	GENERAL		116.80			
			Invoice Net			116.80			
23093	A. RUSSO & SONS, INC.		00000	11486419	INV 01/10/2019	548335	338525		
	1 15122260 84902	3520	HARDY GEN	HARDY FOOD		230.00			
			Invoice Net			230.00			
23093	A. RUSSO & SONS, INC.		00000	11486319	INV 01/10/2019	549565	338776		
	1 15123260 85103	3520	AFT SCH	GENERAL		142.80			
			Invoice Net			142.80			
						CHECK TOTAL	689.60		-----
34108	SAFARILAND, LLC		00000	11594919	INV 01/10/2019	I010-178543	338526		
	1 02016507 85806	2430	SEC EDUC	MISC SUPPL		33.17			
			Invoice Net			33.17			
						CHECK TOTAL	33.17		-----
24874	SAL'S PIZZA		00000	191635	INV 01/10/2019	0067757	338339		
	1 03034309 835001		FOOD SERV	FOOD SERVI		142.80			
			Invoice Net			142.80			
24874	SAL'S PIZZA		00000	191635	INV 01/10/2019	0067758	338342		
	1 03034309 835001		FOOD SERV	FOOD SERVI		178.50			
			Invoice Net			178.50			
24874	SAL'S PIZZA		00000	191635	INV 01/10/2019	0067759	338343		
	1 03034309 835001		FOOD SERV	FOOD SERVI		178.50			
			Invoice Net			178.50			
24874	SAL'S PIZZA		00000	191635	INV 01/10/2019	0067760	338344		
	1 03034309 835001		FOOD SERV	FOOD SERVI		107.10			
			Invoice Net			107.10			

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CASH ACCOUNT: 0000

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
24874	SAL'S PIZZA 1 03034309 835001	00000	191635	INV	01/10/2019	0067761 107.10 107.10	338345		
24874	SAL'S PIZZA 1 03034309 835001	00000	191635	INV	01/10/2019	0067762 178.50 178.50	338346		
24874	SAL'S PIZZA 1 03034309 835001	00000	191635	INV	01/10/2019	0067763 178.50 178.50	338347		
24874	SAL'S PIZZA 1 03034309 835001	00000	191635	INV	01/10/2019	0067764 71.40 71.40	338348		
						CHECK TOTAL	1,142.40		-----
33071	SCHNEIDER, BRENDYN 1 1336770 81112 6200	00000	193530	INV	01/10/2019	STORYTELLG10/17-12/5 225.00 225.00	338562		
						CHECK TOTAL	225.00		-----
13868	SCHOOL HEALTH CORPORAT 1 02456842 85110 2420	00000	193432	INV	01/10/2019	3540374-00 112.90 112.90	338479		
						CHECK TOTAL	112.90		-----
73185	SCHOOL SPECIALTY, INC. 1 02546750 85103 2415	00006	65016719	INV	01/10/2019	208121804839 6.69 6.69	337453		
73185	SCHOOL SPECIALTY, INC. 1 02056507 85103 2415	00006	65017219	INV	01/10/2019	208121202848 31.28 31.28	337454		
73185	SCHOOL SPECIALTY, INC. 1 02186506 85103 2415	00006	65024519	INV	01/10/2019	208121761009 40.19 40.19	337455		
73185	SCHOOL SPECIALTY, INC. 1 15125145 84201 3520	00006	65026319	INV	01/10/2019	308103191743 134.92 134.92	337456		
73185	SCHOOL SPECIALTY, INC. 1 02246506 85103 2415	00006	65032619	INV	01/10/2019	208122193345 50.93 50.93	337457		
73185	SCHOOL SPECIALTY, INC. 1 02246506 85103 2415	00006	65032719	INV	01/10/2019	208122193347 89.52 89.52	337458		
73185	SCHOOL SPECIALTY, INC. 1 02246506 85103 2415	00006	65032819	INV	01/10/2019	208122193346 11.03 11.03	337459		
73185	SCHOOL SPECIALTY, INC. 1 15125145 85103 3520	00006	65032119	INV	01/10/2019	308103242195 671.70 671.70	337476		

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CASH ACCOUNT: 0000 104013 VENDOR 8304 WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
73185	SCHOOL SPECIALTY, INC.	00006	65028619	INV	01/10/2019	208121918305	337843		
	1 02056507 85103 2415	GIBBS TEMP	INSTRUCT			207.00			
		Invoice Net				207.00			
73185	SCHOOL SPECIALTY, INC.	00006	65003219	INV	01/10/2019	308103107940	337992		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			388.93			
		Invoice Net				388.93			
73185	SCHOOL SPECIALTY, INC.	00006	65005619	INV	01/10/2019	308103105472	337993		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			838.17			
		Invoice Net				838.17			
73185	SCHOOL SPECIALTY, INC.	00006	65006419	INV	01/10/2019	208121013037	337994		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			131.26			
		Invoice Net				131.26			
73185	SCHOOL SPECIALTY, INC.	00006	65006519	INV	01/10/2019	308103109812	337995		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			515.13			
		Invoice Net				515.13			
73185	SCHOOL SPECIALTY, INC.	00006	65007219	INV	01/10/2019	308103105480	337996		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			962.28			
		Invoice Net				962.28			
73185	SCHOOL SPECIALTY, INC.	00006	65007519	INV	01/10/2019	208121013018	337997		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			10.16			
		Invoice Net				10.16			
73185	SCHOOL SPECIALTY, INC.	00006	65007819	INV	01/10/2019	308103125150	337998		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			1,310.82			
		Invoice Net				1,310.82			
73185	SCHOOL SPECIALTY, INC.	00006	65007819	INV	01/10/2019	208121525351	337999		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			13.92			
		Invoice Net				13.92			
73185	SCHOOL SPECIALTY, INC.	00006	65007819	INV	01/10/2019	208121544474	338000		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			13.92			
		Invoice Net				13.92			
73185	SCHOOL SPECIALTY, INC.	00006	65008619	INV	01/10/2019	308103126754	338001		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			918.04			
		Invoice Net				918.04			
73185	SCHOOL SPECIALTY, INC.	00006	65008619	INV	01/10/2019	208121449075	338002		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			19.68			
		Invoice Net				19.68			
73185	SCHOOL SPECIALTY, INC.	00006	65016619	INV	01/10/2019	208121128760	338003		
	1 02156506 85103 2415	ELEM EDUC	INSTRUCT			66.94			
		Invoice Net				66.94			
73185	SCHOOL SPECIALTY, INC.	00006	65026419	INV	01/10/2019	308103207591	338236		
	1 02036507 84201 2430	SEC EDUC	OFFICE			3,220.20			
		Invoice Net				3,220.20			
73185	SCHOOL SPECIALTY, INC.	00006	65028419	INV	01/10/2019	308103226830	338238		
	1 02066506 85103 2415	ELEM EDUC	INSTRUCT			1,608.29			
		Invoice Net				1,608.29			
73185	SCHOOL SPECIALTY, INC.	00006	65031319	INV	01/10/2019	208122095372	338239		
	1 02126506 85103 2415	ELEM EDUC	INSTRUCT			15.12			
		Invoice Net				15.12			

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CASH ACCOUNT: 0000 104013 VENDOR 8304

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
73185	SCHOOL SPECIALTY, INC.	00006	11531919	INV	01/10/2019	308103209524	338527		
	1 02366710 85103	2415	C&I HEALTH	INSTRUCT		314.12			
			Invoice Net			314.12			
73185	SCHOOL SPECIALTY, INC.	00006	65006019	INV	01/10/2019	208121012158	338771		
	1 02036518 85103	2415	FAM/CONS S	INSTRUCT		147.06			
			Invoice Net			147.06			
73185	SCHOOL SPECIALTY, INC.	00006	65020119	INV	01/10/2019	208122123168	338774		
	1 02246506 85103	2415	ELEM EDUC	INSTRUCT		.78			
			Invoice Net			.78			
73185	SCHOOL SPECIALTY, INC.	00006	65001819	INV	01/10/2019	308103076895	338777		
	1 02096506 85103	2415	ELEM EDUC	INSTRUCT		1,933.96			
			Invoice Net			1,933.96			
73185	SCHOOL SPECIALTY, INC.	00006	65001719	INV	01/10/2019	308103076892	338778		
	1 02096506 85103	2415	ELEM EDUC	INSTRUCT		5,099.01			
			Invoice Net			5,099.01			
			CHECK TOTAL			18,771.05			-----
73818	SCHOOLS FOR CHILDREN,	00000	193068	INV	01/10/2019	143842	338176		
	1 02456848 83201	9300	TUITION DY	TUITION		1,975.00			
			Invoice Net			1,975.00			
			CHECK TOTAL			1,975.00			-----
73852	SEEM COLLABORATIVE	00000	190709	INV	01/10/2019	73179	338177		
	1 02456848 83201	9400	TUITION DY	TUITION		4,920.00			
			Invoice Net			4,920.00			
73852	SEEM COLLABORATIVE	00000	190710	INV	01/10/2019	73181	338179		
	1 02456848 83201	9400	TUITION DY	TUITION		4,920.00			
			Invoice Net			4,920.00			
73852	SEEM COLLABORATIVE	00000	190832	INV	01/10/2019	73180	338180		
	1 02456845 83201	9300	OOD/AIDE	TUITION		3,255.00			
	2 02456848 83201	9400	TUITION DY	TUITION		4,920.00			
			Invoice Net			8,175.00			
			CHECK TOTAL			18,015.00			-----
28807	SEVEN HILLS PEDIATRIC	00001	190679	INV	01/10/2019	09-139769	338181		
	1 07506848 83201	9300	CB OOD DAY	TUITION		3,890.40			
			Invoice Net			3,890.40			
28807	SEVEN HILLS PEDIATRIC	00001	190680	INV	01/10/2019	09-139770	338182		
	1 07506848 83201	9300	CB OOD DAY	TUITION		3,890.40			
			Invoice Net			3,890.40			
			CHECK TOTAL			7,780.80			-----
36257	SHEN, QIU YUAN	00000	193537	INV	01/10/2019	TEEN AIDE 9/25-12/6	338564		
	1 1336770 81202	6200	ADULT ED	TEMP SAL		312.00			
			Invoice Net			312.00			
			CHECK TOTAL			312.00			-----

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PRELIMINARY DETAIL INVOICE LIST

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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
73929	SIMMONS, CAROLYN 1 1973 84000	00000	193629	INV PAC MISC Invoice Net	01/10/2019	REIMB STAFF MTGS 80.50 80.50 CHECK TOTAL 80.50	338772		-----
33893	SIMON, MICHAEL ALAN 1 14856542 83101 3520	00000	11636719	INV HS INSTRUM PROF TECH Invoice Net	01/10/2019	12/3/-1/4/19-BASS 1,224.00 1,224.00 CHECK TOTAL 1,224.00	338537		-----
73930	J.B. SIMONS, INC. 1 02496955 81760 5550	00000	11621319	INV TRAFFIC CLOTHING Invoice Net	01/10/2019	95897 494.20 494.20 CHECK TOTAL 494.20	337461		-----
33735	SKANSKA USA BUILDING I 1 6223778 5871	00001	181097	INV AHS STUDY AHS STUDY Invoice Net	01/10/2019	1317826-000-13649-16 17,630.00 17,630.00 CHECK TOTAL 17,630.00	337462		-----
74015	SPORTS, ETC. 1 02026626 85104 3510 2 02026640 85104 3510	00000	192329	INV ATHL/HOCKE ATHL SUPPL ATH/G/I.H. ATHL SUPPL Invoice Net	01/10/2019	8112 330.00 220.00 550.00 CHECK TOTAL 550.00	338004		-----
34990	STANIC-RASIN, IRENA 1 1336770 85103 6200	00000	193533	INV ADULT ED INSTRUCT Invoice Net	01/10/2019	REIMB ITALIAN MATS 409.90 409.90 CHECK TOTAL 409.90	338566		-----
31792	TEAGER, DANIEL H. 1 14856542 83101 3520	00000	11637019	INV HS INSTRUM PROF TECH Invoice Net	01/10/2019	12/3/-1/4/19-TRUMPET 1,104.00 1,104.00 CHECK TOTAL 1,104.00	338538		-----
34878	TERRILL, LAURA LOUISE 1 14118107 83101 2357	00000	193623	INV THEMATIC CONSULT Invoice Net	01/10/2019	CONSULT SVCS+EXP 3,868.04 3,868.04 CHECK TOTAL 3,868.04	338773		-----
36241	THE FIRST CHURCH OF CH 1 149 8350	00000	11617119	INV CO-CURRICU OTTOSON CO Invoice Net	01/10/2019	FIELD TRIP 12/20/18 330.00 330.00 CHECK TOTAL 330.00	337474		-----
28406	THIRD SECTOR NEW ENGLA	00000	11639619	INV	01/10/2019	TOOL-SSI17840	337844		

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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
1	02306740 85103	2415	C&I ENGLIS	INSTRUCT		175.00			
			Invoice Net			175.00			
						CHECK TOTAL	175.00		-----
28746	CREDLE-THOMAS,MARGARET	00000	193538	INV	01/10/2019	REIMB MILEGE-SEPT'18	338252		
1	1322019 87202 2357		METCO 2019	TRAINING		37.61			
			Invoice Net			37.61			
28746	CREDLE-THOMAS,MARGARET	00000	193538	INV	01/10/2019	REIMB MILEGE-OCT'18	338253		
1	1322019 87202 2357		METCO 2019	TRAINING		63.25			
			Invoice Net			63.25			
28746	CREDLE-THOMAS,MARGARET	00000	193538	INV	01/10/2019	REIMB MILEGE -NOV'18	338255		
1	1322019 87202 2357		METCO 2019	TRAINING		48.88			
			Invoice Net			48.88			
28746	CREDLE-THOMAS,MARGARET	00000	193538	INV	01/10/2019	REIMB MILEGE-DEC'18	338256		
1	1322019 87202 2357		METCO 2019	TRAINING		36.70			
			Invoice Net			36.70			
						CHECK TOTAL	186.44		-----
22736	THURSTON FOODS,INC.	00000	11543719	INV	01/10/2019	151435	337463		
1	02036507 85103 2415		SEC EDUC	INSTRUCT		3.95			
			Invoice Net			3.95			
22736	THURSTON FOODS,INC.	00000	11543719	INV	01/10/2019	159251	337464		
1	02036507 85103 2415		SEC EDUC	INSTRUCT		35.28			
			Invoice Net			35.28			
22736	THURSTON FOODS,INC.	00000	11568219	INV	01/10/2019	171546	337465		
1	02016518 84902 2415		FAM/CONS S	FOOD SUPPL		109.51			
			Invoice Net			109.51			
22736	THURSTON FOODS,INC.	00000	11568219	INV	01/10/2019	176049	337466		
1	02016518 84902 2415		FAM/CONS S	FOOD SUPPL		36.13			
			Invoice Net			36.13			
22736	THURSTON FOODS,INC.	00000	11484819	INV	01/10/2019	179781	338005		
1	15122260 84902 3520		HARDY GEN	HARDY FOOD		1,318.76			
			Invoice Net			1,318.76			
22736	THURSTON FOODS,INC.	00000	191633	INV	01/10/2019	176044	338349		
1	03034309 835001		FOOD SERV	FOOD SERVI		1,763.71			
			Invoice Net			1,763.71			
22736	THURSTON FOODS,INC.	00000	191633	INV	01/10/2019	176045	338350		
1	03034309 835001		FOOD SERV	FOOD SERVI		6.50			
			Invoice Net			6.50			
22736	THURSTON FOODS,INC.	00000	191633	INV	01/10/2019	176047	338351		
1	03034309 835001		FOOD SERV	FOOD SERVI		1,780.49			
			Invoice Net			1,780.49			
22736	THURSTON FOODS,INC.	00000	191633	INV	01/10/2019	176048	338352		
1	03034309 835001		FOOD SERV	FOOD SERVI		9.75			
			Invoice Net			9.75			
22736	THURSTON FOODS,INC.	00000	191633	INV	01/10/2019	176050	338356		
1	03034309 835001		FOOD SERV	FOOD SERVI		840.82			
			Invoice Net			840.82			

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CASH ACCOUNT: 0000

104013

VENDOR 8304

WARRANT: 19131

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VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	176051 6.50 6.50	338357		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	176052 1,902.30 1,902.30	338359		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	176053 22.75 22.75	338361		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	177012 1,273.52 1,273.52	338362		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	177013 880.22 880.22	338364		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	179783 572.59 572.59	338365		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	179785 1,181.38 1,181.38	338367		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	179786 3.25 3.25	338369		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	179787 1,802.06 1,802.06	338371		
22736	THURSTON FOODS, INC. 1 03034309 835001	00000	191633	INV FOOD SERV Invoice Net	01/10/2019 FOOD SERVI	179788 32.50 32.50	338373		
22736	THURSTON FOODS, INC. 1 15123260 84902 3520	00000	11485019	INV AFT SCH Invoice Net	01/10/2019 FOOD SUPPL	181850 655.03 655.03	338667		
						CHECK TOTAL	14,237.00		-----
15627	TOBII DYNAVOX LLC 1 02216506 85103 2415	00001	11615519	INV ELEM EDUC Invoice Net	01/10/2019 INSTRUCT	INV00124802 99.00 99.00	338006		
						CHECK TOTAL	99.00		-----
29310	TWELFTH BAPTIST CHURCH 1 1322019 87301 2357	00000	192143	INV METCO 2019 Invoice Net	01/10/2019 PROF AFFLI	10/18+12/1 MEETINGS 400.00 400.00	338241		
						CHECK TOTAL	400.00		-----
36231	UHLENBROCK, JUSTINE 1 0572019 87202 3200	00000	193445	INV ESH Invoice Net	01/10/2019 TRAINING	REIMB DIABETES PRGM 125.00 125.00	337467		

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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
						CHECK TOTAL	125.00		-----
34161	UMINSKI, KAREN L.					BELLY DANCE WRKOUT	338568		
	1 1336770 81112	6200	00000	193532 INV	01/10/2019	200.00			
				ADULT ED INSTRUCT		200.00			
				Invoice Net					
						CHECK TOTAL	200.00		-----
34993	UPBEAT CYCLING LLC					004	337413		
	1 1336782 81112		00000	193433 INV	01/10/2019	1,743.75			
				TEENZONE TEACHER SA		1,743.75			
				Invoice Net					
						CHECK TOTAL	1,743.75		-----
32720	USUI, ASUKA					12/3/-1/4/19-VIOLIN	338539		
	1 14856542 83101	3520	00000	11636419 INV	01/10/2019	716.00			
				HS INSTRUM PROF TECH		716.00			
				Invoice Net					
						CHECK TOTAL	716.00		-----
31959	VAN VOORHIES, SANDRA W					12/5/18-12/19/18	338183		
	1 02456830 83101	2320	00000	190651 INV	01/10/2019	240.00			
				SPED/MEDS PROF TECH		240.00			
				Invoice Net					
						CHECK TOTAL	240.00		-----
18655	VERNIER SOFTWARE AND T					5319500	337845		
	1 14119102 85802	2451	00000	193443 INV	01/10/2019	1,504.69			
				DIGITAL IN COMPUTER		1,504.69			
				Invoice Net					
						CHECK TOTAL	1,504.69		-----
72475	VILLANO, MARY					REIMB EATALY FT	337468		
	1 18406507 83302	3520	00000	11645519 INV	01/10/2019	360.00			
				AHS/LANG FIELD TRIP		360.00			
				Invoice Net					
						CHECK TOTAL	360.00		-----
29245	VINT, WILLIAM					12/3/-1/4/19WOODWIND	338540		
	1 14856542 83101	3520	00000	11636019 INV	01/10/2019	2,904.00			
				HS INSTRUM PROF TECH		2,904.00			
				Invoice Net					
						CHECK TOTAL	2,904.00		-----
35575	VOYAGER SOPRIS LEARNIN					2059835	337469		
	1 02246506 85103	2415	00001	11610819 INV	01/10/2019	1,043.85			
				ELEM EDUC INSTRUCT		1,043.85			
				Invoice Net					
						CHECK TOTAL	1,043.85		-----
13234	W. B. MASON CO., INC.					I61827666	337470		
	1 02606910 84201	1210	00001	11506719 INV	01/10/2019	134.28			
				SUPER OFFICE		134.28			
				Invoice Net					
13234	W. B. MASON CO., INC.					I61919842	337846		
	1 1336765 84201	6200	00001	190876 INV	01/10/2019	47.82			
				GEN ADMIN OFFICE		47.82			
				Invoice Net					

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PRELIMINARY DETAIL INVOICE LIST

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CASH ACCOUNT: 0000 104013 VENDOR 8304

WARRANT: 19131 01/10/2019

VENDOR	G/L ACCOUNTS	R	PO	TYPE	DUE DATE	INVOICE/AMOUNT	DOCUMENT	VOUCHER	CHECK
13234	W. B. MASON CO., INC.	00001	193438	INV	01/10/2019	I61925603	338242		
	1 02486745 84201 2430		C&I SOC ST	OFFICE		17.90			
			Invoice Net			17.90			
13234	W. B. MASON CO., INC.	00001	193438	INV	01/10/2019	I61956265	338243		
	1 02486745 84201 2430		C&I SOC ST	OFFICE		15.28			
			Invoice Net			15.28			
13234	W. B. MASON CO., INC.	00001	191642	INV	01/10/2019	I61161846	338375		
	1 03034309 835005		FOOD SERV	FOOD SERV		84.48			
			Invoice Net			84.48			
13234	W. B. MASON CO., INC.	00001	193446	INV	01/10/2019	I61927631	338779		
	1 02056507 84201 2430		GIBBS TEMP	OFFICE		503.89			
			Invoice Net			503.89			
13234	W. B. MASON CO., INC.	00001	193446	INV	01/10/2019	I61956323	338780		
	1 02056507 84201 2430		GIBBS TEMP	OFFICE		42.00			
			Invoice Net			42.00			
			CHECK TOTAL			845.65			-----
74469	WANAMAKER HARDWARE INC	00000	11479219	INV	01/10/2019	151791	337471		
	1 15125145 85103 3520		BRACKETT	SUPPLIES		26.09			
			Invoice Net			26.09			
74469	WANAMAKER HARDWARE INC	00000	11479219	INV	01/10/2019	152439	337472		
	1 15125145 85103 3520		BRACKETT	SUPPLIES		31.47			
			Invoice Net			31.47			
			CHECK TOTAL			57.56			-----
74496	WEDIKO CHILDRENS SERVI	00000	191628	INV	01/10/2019	19-ARL-05	338185		
	1 02456575 87202 2357		SPED/P.D.	TRAINING		500.00			
			Invoice Net			500.00			
			CHECK TOTAL			500.00			-----
36272	WILLEY, COLIN	00000		INV	01/10/2019	19395	338760		
	1 02026634 83804 3510		ATH/WRESTL	ATHLETIC		100.00			
			Invoice Net			100.00			
			CHECK TOTAL			100.00			-----
20866	WILLOW HILL SCHOOL	00000	190672	INV	01/10/2019	19-4-LG	338184		
	1 07506848 83201 9300		CB OOD DAY	TUITION		2,244.30			
			Invoice Net			2,244.30			
			CHECK TOTAL			2,244.30			-----
28008	WOBURN YOUTH HOCKEY AS	00000	11458818	INV	01/10/2019	7591	338007		
	1 02026626 83804 3510		ATHL/HOCKE	ATHLETIC		570.00			
			Invoice Net			570.00			
			CHECK TOTAL			570.00			-----
=====									
399 INVOICES			WARRANT TOTAL			792,425.06	792,425.06		
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TOWN OF ARLINGTON
PRELIMINARY WARRANT SUMMARY

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WARRANT: 19131 01/10/2019

FUND ORG	ACCOUNT	AMOUNT	AVLB BUDGET
0200 02016507	SECONDARY EDUCATIO 0200-3-01 -6507-01-10-5-02-85103 -2415	INSTRUCTIONAL MATERIAL 39.68	-27,594.34
0200 02016507	SECONDARY EDUCATIO 0200-3-01 -6507-01-10-5-02-85802 -2415	COMPUTER SUPPLIES 319.85	-27,594.34
0200 02016507	SECONDARY EDUCATIO 0200-3-01 -6507-01-10-5-02-85806 -2430	MISC SUPPLIES 33.17	-27,594.34
0200 02016518	FAMILY/CONSUMER SC 0200-3-01 -6518-01-10-5-01-84902 -2415	FOOD SUPPLIES 494.57	-130.80
0200 02016563	LIBRARY/MEDIA 0200-3-01 -6563-01-10-5-01-85106 -2410	TEXTBOOKS BOOKS PERIOD 44.00	-9,878.20
0200 02016566	MMGT SUPER PRINCIP 0200-3-01 -6566-01-10-5-07-84902 -2210	HS FOOD SUPPLIES PRINC 377.05	-49,361.64
0200 02026620	ATHLETICS/ADMIN 0200-3-02 -6620-01-24-9-00-83804 -3510	ATHLETIC SERVICES 1,083.00	1,421,312.22
0200 02026620	ATHLETICS/ADMIN 0200-3-02 -6620-01-24-9-00-85104 -3510	ATHLETIC SUPPLIES 61.85	1,421,312.22
0200 02026622	ATHLETICS/BOYS BAS 0200-3-02 -6622-01-24-5-00-83804 -3510	ATHLETIC SERVICES 212.00	6,895.00
0200 02026626	ATHLETICS/ICE HOCK 0200-3-02 -6626-01-24-5-00-83804 -3510	ATHLETIC SERVICES 924.20	34,064.20
0200 02026626	ATHLETICS/ICE HOCK 0200-3-02 -6626-01-24-5-00-85104 -3510	ATHLETIC SUPPLIES 330.00	34,064.20
0200 02026634	ATHLETICS/BOYS WRE 0200-3-02 -6634-01-24-5-00-83804 -3510	ATHLETIC SERVICES 100.00	1,421,312.22
0200 02026635	ATHLETICS/GIRLS BA 0200-3-02 -6635-01-24-5-00-83804 -3510	ATHLETIC SERVICES 466.00	2,990.00
0200 02026635	ATHLETICS/GIRLS BA 0200-3-02 -6635-01-24-5-00-85104 -3510	ATHLETIC SUPPLIES 4,992.00	1,421,312.22
0200 02026640	ATHLETICS/GIRLS IC 0200-3-02 -6640-01-24-5-00-83804 -3510	ATHLETIC SERVICES 134.00	28,554.00
0200 02026640	ATHLETICS/GIRLS IC 0200-3-02 -6640-01-24-5-00-85104 -3510	ATHLETIC SUPPLIES 220.00	1,421,312.22
0200 02036507	SECONDARY EDUCATIO 0200-3-03 -6507-03-01-4-01-84201 -2430	OFFICE SUPPLIES 3,220.20	8,397.10
0200 02036507	SECONDARY EDUCATIO 0200-3-03 -6507-03-01-4-01-85103 -2415	INSTRUCTIONAL MATERIAL 223.74	8,397.10
0200 02036507	SECONDARY EDUCATIO 0200-3-03 -6507-03-01-4-01-85106 -2410	MIDDLE SCH/TEXTBOOKS 50.00	8,397.10
0200 02036518	FAMILY/CONSUMER SC 0200-3-03 -6518-03-01-4-00-85103 -2415	INSTRUCTIONAL MATERIAL 147.06	1,421,312.22
0200 02056507	GIBBS - TEMP SALAR 0200-3-3520 -6507-05-01-4-01-84201 -2430	OFFICE SUPPLIES 545.89	-11,793.20
0200 02056507	GIBBS - TEMP SALAR 0200-3-3520 -6507-05-01-4-01-85103 -2415	INSTRUCTIONAL MATERIAL 238.28	-11,793.20
0200 02056507	GIBBS - TEMP SALAR 0200-3-3520 -6507-05-01-4-01-85106 -2410	TEXTBOOKS BOOKS PERIOD 756.00	-11,793.20
0200 02066506	ELEMENTARY EDUCATI 0200-3-06 -6506-06-01-3-00-84201 -2430	OFFICE SUPPLIES 209.00	-42,831.37
0200 02066506	ELEMENTARY EDUCATI 0200-3-06 -6506-06-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 1,772.19	-42,831.37
0200 02096506	ELEMENTARY EDUCATI 0200-3-09 -6506-09-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 7,032.97	-32,058.70
0200 02126506	ELEMENTARY EDUCATI 0200-3-12 -6506-12-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 15.12	1,421,312.22
0200 02126506	ELEMENTARY EDUCATI 0200-3-12 -6506-12-01-3-00-85106 -2410	DALLIN/TEXTBOOKS 173.20	1,421,312.22
0200 02156506	ELEMENTARY EDUCATI 0200-3-15 -6506-15-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 8,340.28	-5,207.45
0200 02156506	ELEMENTARY EDUCATI 0200-3-15 -6506-15-01-3-00-85106 -2410	HARDY/TEXTBOOKS 383.35	-5,207.45
0200 02186506	ELEMENTARY EDUCATI 0200-3-18 -6506-18-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 257.12	-48,164.85
0200 02186575	PROFESSIONAL DEVEL 0200-3-18 -6575-18-07-3-00-87202 -2357	TRAINING EDUC CONF & A 199.00	-991.00
0200 02216506	ELEMENTARY EDUCATI 0200-3-21 -6506-21-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 99.00	-32,985.67
0200 02246506	ELEMENTARY EDUCATI 0200-3-24 -6506-24-01-3-00-85101 -2430	REPRO PAPER TONER SUPP 207.28	-37,700.19
0200 02246506	ELEMENTARY EDUCATI 0200-3-24 -6506-24-01-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 4,400.11	-37,700.19
0200 02296581	READING INTERVENTI 0200-3-29 -6581-29-32-3-06-85106 -2410	READING INTERV/TEXTBOO 448.92	-31,390.84
0200 02306740	C&I ENGLISH 0200-3-30 -6740-30-01-5-01-85103 -2415	INSTRUCTIONAL MATERIAL 175.00	10,663.99
0200 02306740	C&I ENGLISH 0200-3-30 -6740-30-01-5-01-87202 -2357	ENGLISH PROF DEV 249.00	10,663.99
0200 02366710	C&I HEALTH WELLNES 0200-3-36 -6710-36-10-9-00-85103 -2415	INSTRUCTIONAL MATERIAL 314.12	41,295.61
0200 02426715	C&I SCIENCE 0200-3-42 -6715-01-10-9-00-85103 -2415	INSTRUCTIONAL MATERIAL 662.52	46,545.37
0200 02456575	SPED/PROF DEV 0200-3-45 -6575-36-02-3-00-87202 -2357	TRAINING EDUC CONF & A 1,650.00	8,715.18
0200 02456803	SPED TUTOR/C.S. 0200-3-45 -6803-36-02-9-00-83101 -2310	PROFESSIONAL TECH SERV 1,312.65	1,421,312.22
0200 02456806	SPED ADM MGMT SERV 0200-3-45 -6806-01-02-9-00-85101 -2430	REPRO PAPER TONER SUPP 336.00	18,044.10
0200 02456806	SPED ADM MGMT SERV 0200-3-45 -6806-01-02-9-00-87101 -2110	BUSINESS TRAVEL 404.70	18,044.10
0200 02456821	SPED/CLINICAL SUPE 0200-3-45 -6821-36-02-9-00-83101 -2320	PROFESSIONAL TECH SERV 16,372.00	-31,080.41
0200 02456830	SPED/MEDICAL 0200-3-45 -6830-36-23-9-00-83101 -2320	PROFESSIONAL TECH SERV 5,289.00	-30,198.16
0200 02456836	PSYCHOLOGISTS 0200-3-45 -6836-01-02-9-00-85102 -2800	TESTING MATERIALS 573.30	67,433.18
0200 02456839	TEAM CHAIR TEMP SA 0200-3-45 -6839-36-02-9-00-87101 -2315	BUSINESS TRAVEL 114.43	1,421,312.22
0200 02456842	ADAPTIVE TECHNOLOGY 0200-3-45 -6842-45-02-9-06-85110 -2420	INSTRUCTION EQUIPMENT 112.90	13,729.40

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TOWN OF ARLINGTON
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WARRANT: 19131 01/10/2019

FUND	ORG	ACCOUNT	AMOUNT	AVLB BUDGET
0200	02456845	OUT-OF-DISTRICT/ON	0200-3-45 -6845-36-02-9-00-83201 -9300	OOD/ONE-ON-ONE AIDE 5,232.80 64,061.70
0200	02456848	OUT OF DISTRICT TU	0200-3-45 -6848-45-02-9-05-83201 -9300	OUT OF DISTRICT/DAY TU 45,444.66 1,421,312.22
0200	02456848	OUT OF DISTRICT TU	0200-3-45 -6848-45-02-9-05-83201 -9400	SPED LABB TUITION 171,840.38 1,421,312.22
0200	02456851	OUT OF DISTRICT RE	0200-3-45 -6851-36-23-9-00-83201 -9300	TUITION OTHER SCHOOLS 97,911.65 1,421,312.22
0200	02456857	SPED CONTRACTED SE	0200-3-45 -6857-45-02-9-05-83101 -2310	PROFESSIONAL TECH SERV 145.25 -25,470.00
0200	02456857	SPED CONTRACTED SE	0200-3-45 -6857-45-02-9-05-83101 -2330	PROFESSIONAL TECH SERV 1,774.48 -25,470.00
0200	02456980	SPED/MILEAGE REIMB	0200-3-45 -6980-36-02-9-00-83301 -3300	CONTRACTED TRANSPORTAT 595.08 .00
0200	02486745	C&I SOCIAL STUDIES	0200-3-48 -6745-01-10-9-00-84201 -2430	OFFICE SUPPLIES 33.18 12,344.68
0200	02496554	HEALTH SERVICES/NU	0200-3-49 -6554-01-10-9-00-85201 -3200	MEDICAL SURGICAL SUPPL 2,461.00 1,421,312.22
0200	02496955	TRAFFIC SUPERV SAL	0200-3-49 -6955-33-24-9-00-81760 -5550	CLOTHING ALLOWANCE 494.20 1,421,312.22
0200	02546750	VISUAL/PERF ARTS S	0200-3-54 -6750-01-31-9-00-85103 -2415	INSTRUCTIONAL MATERIAL 407.59 -3,127.24
0200	02546755	VISUAL/PERF ARTS S	0200-3-54 -6755-01-31-9-00-83101 -2420	PROFESSIONAL TECH SERV 1,595.00 279.27
0200	02546755	VISUAL/PERF ARTS S	0200-3-54 -6755-01-31-9-00-83302 -2440	FIELD TRIPS 300.00 279.27
0200	02546755	VISUAL/PERF ARTS S	0200-3-54 -6755-01-31-9-00-85103 -2415	INSTRUCTIONAL MATERIAL 284.00 279.27
0200	02576900	SCHOOL COMMITTEE	0200-3-57 -6900-01-27-9-00-87301 -1110	PROFESSIONAL AFFLIATIO 156.00 -8,194.42
0200	02606575	PROF AFFILIATIONS/	0200-3-60 -6575-42-29-9-00-84902 -2357	FOOD SUPPLIES 91.00 7,501.00
0200	02606910	SUPERINTENDENT	0200-3-60 -6910-01-29-9-00-83101 -1210	PROFESSIONAL TECH SERV 200.00 20,467.65
0200	02606910	SUPERINTENDENT	0200-3-60 -6910-01-29-9-00-84201 -1210	OFFICE SUPPLIES 134.28 20,467.65
0200	02606910	SUPERINTENDENT	0200-3-60 -6910-01-29-9-00-85806 -1210	MISC SUPPLIES 46.68 20,467.65
0200	02636575	PROF DEV/ASSISTANT	0200-3-63 -6575-34-09-9-00-87202 -2357	TRAINING EDUC CONF & A 760.00 47,464.66
0200	02636935	HUMAN RESOURCES/PR	0200-3-63 -6935-34-09-9-00-83403 -1420	ADVERTISING 75.00 -8,898.24
0200	02816970	TRANSPORTATION REG	0200-3-81 -6970-49-10-9-00-84802 -3300	MOTOR VEHICLE REPAIR 405.00 -12,625.51
0200	02816970	TRANSPORTATION REG	0200-3-81 -6970-49-10-9-00-87301 -3300	PROFESSIONAL AFFLIATIO 140.00 -12,625.51
0200	02816975	TRANSPORTATION SPE	0200-3-81 -6975-49-02-9-09-83301 -3300	CONTRACTED TRANSPORTAT 504.00 -19,186.39
0200	02816980	SPED/MILEAGE REIMB	0200-3-81 -6980-36-02-9-00-83301 -3300	CONTRACTED TRANSPORTAT 8,301.75 1,421,312.22
FUND TOTAL				405,448.68
0300	03034309	FOOD SERVICE REVOL	0300-3-3400-0800-30-34-9-NM-835000-	FOOD SERV/SW SUPPLIES 3,701.91 342,324.79
0300	03034309	FOOD SERVICE REVOL	0300-3-3400-0800-30-34-9-NM-835001-	FOOD SERV/SW FOOD 18,886.99 342,324.79
0300	03034309	FOOD SERVICE REVOL	0300-3-3400-0800-30-34-9-NM-835003-	FOOD SERV/DIRECT EXPEN 53.60 342,324.79
0300	03034309	FOOD SERVICE REVOL	0300-3-3400-0800-30-34-9-NM-835005-	FOOD SERV/OFFICE SUPPL 84.48 342,324.79
FUND TOTAL				22,726.98
0309	03092019	TITLE IV A	0309-3-2300-2019-45-38-5-NM-87208 -2357	TITLE IIA-ARL CATHOLIC 2,000.00 9.00
FUND TOTAL				2,000.00
0570	0572019	ESSENTIAL SCHOOL H	0570-3-3200-2019-45-14-0-NM-87202 -3200	TRAINING EDUC CONF & A 125.00 2,416.00
FUND TOTAL				125.00
0750	07506848	CB OOD DAY NON PUB	0750-3-45 -6848-45-2 -9-NM-83201 -9300	CD OOD DAY NON PUBLIC 89,531.76 -640,574.64
FUND TOTAL				89,531.76
0790	0792019	IMPROVING EDUCATIO	0790-3-2300-2019-45-9 -9-0 -87208 -2357	TITLE IIA-ARL CATHOLIC 203.00 5,826.00

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TOWN OF ARLINGTON
PRELIMINARY WARRANT SUMMARY

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WARRANT: 19131 01/10/2019

FUND ORG	ACCOUNT	AMOUNT	AVLB BUDGET
FUND TOTAL		203.00	
0930 0932019	EARLY PARTNERSHIP/ 0930-3-2300-2019-45-23-3-NM-83101 -2310	PROFESSIONAL TECH SERV 550.00	.00
FUND TOTAL		550.00	
0940 0942018	SPED 94-142 ALLOCA 0940-3-2300-2018-45-13-2-NM-83101 -2357	PROFESSIONAL TECH SERV 1,412.55	-1,861.55
FUND TOTAL		1,412.55	
1320 1322019	METCO 2019 1320-3-2300-2019-45-13-9-NM-83301 -3300	CONTRACTED TRANSPORTAT 42,150.00	172,282.15
1320 1322019	METCO 2019 1320-3-2300-2019-45-13-9-NM-87202 -2357	TRAINING EDUC CONF & A 186.44	172,282.15
1320 1322019	METCO 2019 1320-3-2300-2019-45-13-9-NM-87301 -2357	PROFESSIONAL AFFLIATIO 400.00	172,282.15
FUND TOTAL		42,736.44	
1330 1336765	COMM ED GENERAL AD 1330-3-2731-6765-01-40-7-NM-84201 -6200	OFFICE SUPPLIES 47.82	.00
1330 1336770	COMM ED ADULT EDUC 1330-3-2731-6770-01-40-7-NM-81112 -6200	INSTRUCTIONAL SALARIES 1,212.50	.00
1330 1336770	COMM ED ADULT EDUC 1330-3-2731-6770-01-40-7-NM-81202 -6200	TEMP SECRETARIAL 1,088.50	.00
1330 1336770	COMM ED ADULT EDUC 1330-3-2731-6770-01-40-7-NM-82702 -6200	LAND RENTAL/LEASE 2,144.75	.00
1330 1336770	COMM ED ADULT EDUC 1330-3-2731-6770-01-40-7-NM-85103 -6200	INSTRUCTIONAL SUPPLIES 409.90	.00
1330 1336775	COMM ED SUMMER FUN 1330-3-2731-6775-01-40-7-NM-81112 -6200	INSTRUCTIONAL SALARIES 400.00	.00
1330 1336780	COMMUNITY ED KIDZO 1330-3-2731-6780-01-40-7-NM-81112 -3520	INSTRUCTIONAL SALARIES 880.00	.00
1330 1336782	COMMUNITY ED TEENZ 1330-3-2731-6782-01-40-7-NM-81112 -	TEACHER SALARY & WAGES 1,743.75	.00
FUND TOTAL		7,927.22	
1360 136	DALLIN GIFTS GRANT 1360-3-2732-OSR -12-43-3-NM-8350 -	DALLIN GIFTS AND GRANT 1,694.00	225.13
FUND TOTAL		1,694.00	
1410 14118107	THEMATIC UNITS WOR 1410-3-51 -6730-31-49-9-NM-83101 -2357	CONTRACTED SERVICES CO 3,868.04	-3,868.04
1410 14119102	MOBILE & FLEXIBLE 1410-3-42 -0100-01-49-5-NM-85802 -2451	VERNIER LABQUEST MINI 1,504.69	.31
FUND TOTAL		5,372.73	
1450 145	OUTDOOR EDUCATION 1450-3-2734-OR -01-48-3-NM-8350 -	OUTDOOR ED/REVOV ACCT 25,224.25	20,984.45
FUND TOTAL		25,224.25	
1485 14856542	HS INSTRUMENTAL MU 1485-3-2735-6542-33-56-5-NM-83101 -3520	HS INSTRUMENTAL MUSIC 20,771.00	-257,346.00
FUND TOTAL		20,771.00	
1490 149	OTTOSON CO-CURRICU 1490-3-2735-OR -03-57-4-NM-7289 -	MISCELLANEOUS REVENUE 4,050.00	.00
1490 149	OTTOSON CO-CURRICU 1490-3-2735-OR -03-57-4-NM-8350 -	OTTOSON CO-CURR FEES 1,669.45	140,777.26
FUND TOTAL		5,719.45	

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TOWN OF ARLINGTON
PRELIMINARY WARRANT SUMMARY

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WARRANT: 19131 01/10/2019

FUND ORG	ACCOUNT	AMOUNT	AVLB BUDGET
1512 15122160	HARDY 1512-3-2300-0000-15-1 -3-NM-83302 -3520	FIELD TRIPS HARDY 504.00	-1,334.00
1512 15122260	HARDY GENERAL SUPP 1512-3-2300-0025-15-5 -3-NM-84902 -3520	HARDY FOOD 1,866.16	-24,327.43
1512 15122260	HARDY GENERAL SUPP 1512-3-2300-0025-15-5 -3-NM-85103 -3520	HARDY GENERAL SUPPLIES 227.71	-6,584.95
1512 15123160	THOMPSON AFTER SCH 1512-3-2300-0251-24-0 -3-NM-83302 -3520	THOMPSON FIELD TRIPS 400.00	-1,430.00
1512 15123260	THOMPSON AFTER SCH 1512-3-2300-OR -15-6 -3-NM-84902 -3520	THOMPSON FOOD SUPPLIES 819.30	-15,860.05
1512 15123260	THOMPSON AFTER SCH 1512-3-2300-OR -15-6 -3-NM-85103 -3520	THOMPSON GENERAL SUPPL 301.42	-15,996.32
1512 15124145	OTTOSON 1512-3-24 -OR -24-9 -3-NM-84902 -3520	FOOD SUPPLIES 216.43	-72,241.42
1512 15124160	OTTOSON 1512-3-2300-0000-03-8 -4-NM-83302 -3520	FIELD TRIPS OTTOSON 75.60	-435.60
1512 15125145	BRACKETT IMMERSION 1512-3-09 -OR -09-9 -3-NM-83302 -3520	FIELD TRIPS BRACKETT I 98.00	18,641.44
1512 15125145	BRACKETT IMMERSION 1512-3-09 -OR -09-9 -3-NM-84201 -3520	OFFICE SUPPLIES BRACKETT 134.92	18,641.44
1512 15125145	BRACKETT IMMERSION 1512-3-09 -OR -09-9 -3-NM-85103 -3520	GENERAL SUPPLIES BRACKETT 729.26	18,641.44
1512 15126145	GIBBS 1512-3-26 -OR -50-5 -4-NM-83302 -3520	FIELD TRIPS 576.40	-576.40
1512 15126145	GIBBS 1512-3-26 -OR -50-5 -4-NM-84902 -3520	FOOD SUPPLIES 209.33	-10,000.00
FUND TOTAL		6,158.53	
1520 152	BLDG USER FEES/ART 1520-3-2737-OR -33-59-9-NM-8300 -	CONTRACTED SERVICES 142.98	-72,260.17
FUND TOTAL		142.98	
1770 177	ARL PUBLIC SCH CHI 1770-3-2796-OSR -21-00-3-NM-8300 -	CONTRACTED SERVICES 19.00	-228.00
FUND TOTAL		19.00	
1840 18406506	ELEM EDUCATION 1840-3-29 -6506-29-24-3-00-85103 -2415	INSTRUCTIONAL MATERIAL 847.00	.00
1840 18406507	AHS/FOREIGN LONG 1840-3-51 -6507-01-24-5-00-83302 -3520	FIELD TRIPS 360.00	.00
1840 18406515	ARLINGTON HIGH/TEX 1840-3-01 -6515-01-24-5-00-85103 -2415	INSTRUCTIONAL MATERIAL 1,600.50	.00
FUND TOTAL		2,807.50	
1950 1952	TRANSCRIPTS 1950-3-0046-OR -69-10-0-NM-84000 -	MISC EXPENSES 19.45	196.40
1950 1953	PSAT SAT AP 1950-3-2710-OR -69-10-0-NM-84000 -	MISC EXPENSES 3,962.00	99,787.15
FUND TOTAL		3,981.45	
1973 1973	PAC TEACHER APPREC 1973-3-01 -OR -01-10-5-NM-84000 -	MISC 80.50	5,327.31
FUND TOTAL		80.50	
6220 6223778	AHS FEASIBILITY STU 6220-3-0471-3778-01-80-0-88-5871 -	AHS FEASIBILITY STUDY- 147,792.04	172,808.36
FUND TOTAL		147,792.04	
WARRANT SUMMARY TOTAL		792,425.06	
GRAND TOTAL		792,425.06	

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TOWN OF ARLINGTON
PRELIMINARY WARRANT LIST BY VOUCHER

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WARRANT: 19131 01/10/2019

VOUCHER	VENDOR	VENDOR NAME	DOCUMENT	PO	TYPE	DUE DATE	AMOUNT	COMMENT
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** END OF REPORT - Generated by Steve Walenski **

Arlington Public Schools

Student Out of State and Travel Abroad Application

Today's Date 1/3/2019
Trip Leader Name Paul McKnight
School Arlington High School **Subject/Grade** Dean of Students
E-mail address pmcknight@arlington.k12.ma.us **Phone** 781-859-8320

Trip Destination: City(s)/Country Nagaokakyo, Japan for homestay (also, Kyoto, Osaka, Kobe, and Nara)

Dates of Trip **Departure Date** Tues, July 4rd, 2019
 Return Date Sunday, July 16th, 2019

Method of Transportation Japan Airlines/ bus **Leaving from (school, airport)** Boston Logan

Purpose of Trip (check all that apply)

- ☒ Cultural ☒ Educational ☒ Home Stay
☒ Sister City ☒ Student Exchange
☐ Other (describe)

Itinerary (attach additional documents as necessary)

To be determined by Nagaokakyo City Office, but sample itinerary attached.

Describe the educational purpose and value of the trip?

This trip is a cultural and educational student exchange which is now in its 15th year between sister cities Nagaokakyo and Arlington. Students from each city spend between 10 days living with host families, visiting the schools at all levels, sightseeing, and taking part in cultural events unique to the sister city and country. Students are able to participate in an increasingly-globalized world, and create both memories and relationships demonstrating the value of compassion and friendship as the world continues advancing technologically.

If the trip involves missing school, what are the reasons and what steps will be taken to minimize the impact?

N/A

Who may go on the trip? (requirements to participate - grade levels, attendance, behavior, academics - consult the sample Trip Policy Form)

Any student living in Arlington entering the 7th-12th grades who finishes the school year in good academic and behavioral standing may travel with the trip. All students, whether or not they attend Arlington Public Schools must attend 80% (8/10) of the pre-trip cultural and linguistic classes in order to best represent APS and the town on the trip. Students who have graduated may not attend the trip, unless it is agreed that there is a special circumstance (in the past, we have had older, recently graduated siblings travel together with younger siblings with special permission granted due to family circumstances without incident).

Cost of trip per student?

\$2,400

What is included in the trip?

Everything except for souvenirs; students stay with host families, and visit the high school(s), a middle school, and an elementary school for portions of or a full day, they will travel to ancient temples and visit the cities of Kyoto, Osaka, and potentially Kobe and Nara. All train tickets, temple fees, and admission to any attractions is covered in the ~\$200 fee paid to the high school by the students. All students will have their own host family and bedroom on the trip. Students will have between 1-3 host family days where they will get to spend the day with their families and not "touring" with the set itinerary. Students' host families often pair or triple up on these days, especially if the students on the trip are friends.

What is not included in the trip? What expenses will students incur during the trip?

Only the cost of souvenirs/shopping is not included in the trip.

Other Chaperones

Name Jacqueline O'Connor **School** Ottoson Middle School **Subject/Grade** Social Studies/7th

E-mail address joconnor@arlington.k12.ma.us **Phone** 301-520-9775

Name Blythe Colyer **School** Arlington High School **Subject/Grade** Math/9-11

E-mail address bcolyer@arlington.k12.ma.us **Phone** 973-713-5287

How do students register for the trip? Is there a payment plan? Describe.

After advertising via announcements and DailyPost in the high school and middle school, students will submit their applications either digitally or forward them to Rebecca Walsh Bradley or Justin Bourassa, with a ~\$300 deposit to secure their spot on the trip. This ~\$300 deposit will cover the temple admission/tour activities fees incurred while on the trip. All other payments will be made directly to Carousel Student Tours, covering the cost of airfare and travel insurance. Carousel makes payment plans available for travelers on an individual basis.

Is there a process in place for students who have difficulty paying for the trip? (scholarships?)

Funds available? In the past, we have used funds from the Exchange Trip account to cover partial scholarships for students who apply for them. We also have taken advantage of the opportunity for students to apply through Mary Villano's travel scholarships. Dr. Bodie has also provided scholarship assistance for this program in the past, for which we are very appreciative.

Fundraising available? We have not officially used fundraising in the past, but would not be opposed to using a reputable outside source providing both oversight and maximum return for the students; we are open to suggestions according to the Superintendent's guidelines.

Please list the name and contact information for the agency you are working with, if applicable.

Are they insured? Describe the trip insurance plan. (Trip insurance includes coverage for emergency travel home, trip cancellations, etc. This is not just liability.)

We're working with Carousél Student Tours, Inc. again. They've provided us with both airfare and traveler's (cancellation/health) insurance for the past 5 years. This year, as in years past, we are being assisted by Ms. Heidi Butler: *Operations Manager* 508-563-9332/Fax 508-564-4878 PO Box 1404, Pocasset, MA, 02559. We can work with this company to determine cancellation insurance and dates (requested below). This year, the travel agency will be handling payment for airfare directly, and the trip chaperones will be detailing the activities fees, etc. They will determine payment dates and plans for individual students and families.

Describe the refund policy and dates. (Include this information in the Trip Policy Contract that is signed by students and parents/guardians)

Once the tickets are booked for students and they are assigned tickets, they may not be refunded their deposits. Carousél Student Tours, Inc. is handling the students' airfare and passport responsibilities, and we at the high school are handling their temple admission/trip activities' fees (usually no more than ~\$300 USD). The insurance agency provides the information, but we've included excerpts from the trip last year in this sample.

Describe how you will factor emergency cash into the trip budget?

Each year, we travel with emergency cash from our account. Usually this amount is replenished/covered from the previous deposits to hold students' spots on the trip. Each year's deposits enables the next year's ability to cover temple admission fees/ activities fees for the next year's trip.

Describe how you will communicate with parents before and during the trip.

We will host an information session at AHS for all interested parents in the evening, as well as info sessions after school at OMS and AHS. Once the applications are open, we will both be available by email and regularly email parents with updates, information, and regarding the application process. We will have a pre-departure meeting between the end of the school year and the trip's departure. While we are in Japan, we will regularly send updates home via email (photos and news), and assist the Nagaokakyo City Office in creating their daily online newsletter, made available in both English and Japanese.

Describe how you will communicate with administration during the trip.

The chaperones will all be available by phone, email, and videochat. Ideally, our only communication will be via our updates, on which administration will be copied, but in the event of an emergency, we will collaborate as a team of chaperones to establish and maintain contact with administration back home. This will be made easier by having Paul McKnight join us this year.

REQUIRED DOCUMENTS (May be combined)

Trip Application Form

Trip Policy Contract (including refund policy, behavioral expectations, see below)

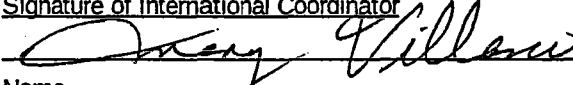
Trip Medical Form (including release, statement confirming that student is clear to go and school will be notified of any change in status)

Release from liability

Consent to treat

Before the application is presented to School Committee, please obtain the following signatures in this order.

Signature of International Coordinator



Name

1/16/19

Date

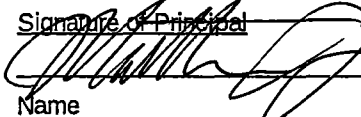
Signature of Department Head

Name

Department

Date

Signature of Principal



AHS

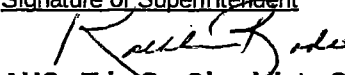
1/16/19

Name

School

Date

Signature of Superintendent



1/18/19

AHS Trip Go Checklist - Complete these steps for all trips before departure.

Meet with students and parents before departure to review school behavioral expectations. Share with administration (in-school rules apply for the entire trip). Parents and students sign a form that states they understand the behavioral expectations and consequences

Trip leaders have checked State Department travel advisories and reviewed any reports with administration.

Leave photocopies of all student and chaperone passports with Main Office

Leave copies of itinerary and contact numbers (e.g., chaperones, hotels, trip sponsoring company, travel agents)

All trips must be approved before publicizing or scheduling.

Complete International Trip application (See Mary Villano)

Trip application reviewed, recorded, and signed by Mary Villano

Trip approved by the Principal and Department Head (where appropriate) **before** submission to the Superintendent and School Committee.

Trip approved by the Superintendent

Trip approved by the School Committee.

Please check, sign, and return to the principal before the deadline for deposit refunds:

Students accepted to the trip have all been screened (check with House Deans) and are in good standing in terms of behavior, attendance, and academics

After students are accepted the trip, all sign a Trip Policy Contract. Leave a copy with Administration.

Students have all signed dates of deposits and understandings of refund policies (copy of file with administration).

Students have completed school/trip medical form and been screened by the Nurse(s).

All parents sign the district release from liability language (can incorporate in other forms)

Before confirming chaperones:

Background check for non-school personnel traveling as chaperones or participants, if applicable.

All non-school chaperones have signed Behavioral Expectations (if applicable).

In the month before trip departure:

Check for students who are in academic or behavioral difficulty. Check in with Deans

All students remain in compliance of all criteria in Trip Policy Contract

Check that all students and chaperones have current passports.

Check that all students have round-trip tickets with names that match their passports and an itinerary that matches the rest of the trip.

Prior to trip the Nurse has checked medical forms for medical issues (need release from doctor/counselor for any significant medical concerns).

Prior to trip the Nurse has checked medical forms for appropriate insurance (e.g., some insurance does not cover them outside of the country).

All checks must be made out to AHS General Fund with the event written in the memo unless payments are made directly to Tour Company.

Group has emergency cash for the trip. This money is factored into the cost of the trip and a check to the advisor for cash is issued through the General Fund. Upon return, all receipts and any unused money is returned to the General Fund account International Fund).

Recommend that a parent or guardian has a current passports in case they need to travel to meet their student.

Consider whether students should have international cell phone access. Explore options.

(organizers, travel agent) with Main Office and Administrative Contact.

Confirm Administrative Contact: Matthew Janger cell: 781-434-8215.

Trip Leader Signature: _____ Date: _____

Trip Selection Criteria

Participation in out-of-school trips is a privilege. The school must be conscious of the safety of all students as well as the way in which the trip represents the school in our community. The trip organizers may make a determination of criteria for students who they feel can safely participate in the trip, who can appropriately represent the school, and who can support the mission and goals of their particular trip. Trips are an optional

enrichment activity offered by school staff. While we work to have scholarships available, families are responsible for the full cost of the trip.

As trips vary in levels of educational mission, risk, distance, length, and commitment, the criteria for selection vary among trips. At the time of selection, we will not consider for participation any student who:

- Has been suspended from school in the past month.

- Would be under suspension from extra curricular activities

- Is carrying a D or lower in any class (this includes I)

- Is in danger of receiving an FA due to attendance

- Has recent medical or mental health conditions which may affect the safety of the student or create a substantial disruption to the trip (This would apply to students receiving an M grade.).

In addition, students who fail to meet the trip selection criteria in the month before a trip may also be excluded from trip participation.

Exclusion from a trip will result in the following consequences:

- Class grades will not be affected by exclusion from a trip.

- In trips related to courses, students will be provided with alternative assignments to make up for any trip work.

- Funds or deposits may not be returned, as deposits and shared costs may not be recouped by the trip group.

SAMPLE FORM

Trip Policy Contract

During school trips, students are "in school" for the entire trip. This means that all trip participants must comply with all school rules and policies and meet all other behavioral expectations for the trip for the duration of the trip, even in the evenings during usually private times. Violation of these expectations may lead a student to be sent home from the trip at their parents expense and may lead to school consequences when they return from the trip.

Participation in out-of-school trips is a privilege. The school must be conscious of the safety of all students as well as the way in which the trip represents the school in our community. A student who within a month of the trip:

- Has been suspended from school.

- Is under suspension from extra curricular activities

- Is carrying a D or lower in any class

- Is in danger of receiving an FA due to attendance

- Experiences changes in medical conditions which may affect the safety of the student or trip.

will be subject to review by the administration along with an organizing faculty member from the trip

Exclusion from a trip for the reasons above will result in the following consequences:

- Class grades will not be affected by exclusion from a trip.

- In trips related to courses, students will be provided with alternative assignments to make up for any trip work.

Funds or deposits may not be returned, as deposits and shared costs may not be recouped by the trip group.

Frequently Asked Questions for Proposals

Please submit to the Building Principal, then

Superintendent Bodie for approval then the School Committee must approve.

Re: Community trip to _____, Today's Date _____

Q: When will the trip be?

A: The trip should be November 7-16.

Q: Who may go on the trip?

A: The trip is open to any resident of Arlington, or All participants on the trip must be over the age of 18 and have a valid passport for travel.

Q: Who is leading the trip?

A: _____, _____ for the Arlington Public Schools, and _____.

Q: How much does the trip cost? How will the students travel? What is included?

The trip will cost \$_____ for people who stay in homestays during the 5 nights in _____. This includes airfare from Boston to _____ airport on the way to _____, and from _____ (Boston on the return flight. The cost includes most meals during our stay _____. It includes all activities and transportation during our 5 days in _____ including transport from _____ airport. It includes the cost of coordinating the trip and the daily plans for the trip.

Q: What is not included in the trip cost?

A:

Q: What is the itinerary for our time in _____

A: _____

Q: I want to go! When is the money due? How will the spots be filled? How can I pay?

A:

Q: What if a student cannot pay:

A:

Please contact _____ or _____ to let us know that you plan to travel with us.

ADDITIONAL QUESTIONS:

Trip company providing? Evidence that they are reliable and insured? Companies' refund policy? Company contact information?

Additional Forms link [HERE](#) for the following:

Medical Form

Release from liability

Consent to treat

Teacher Chaperone Checklist: link [HERE](#)

SAMPLE - SUBJECT TO
CHANGE

2018 Nagaokakyo Visit Itinerary as of 6/19

4-Jul	Wed	18:25	Arrive at ITM by JAL3007	
		20:00	Arrive at Nagaokakyo/ Meet host families	
5-Jul	Thu	8:30	Meet Mayor Nakakoji at City Hall	B Shirt & pants or skirt
			Kyoto Sightseeing : *Nijo Castle/ Kura Sushi/Heian Shrine/Handy Craft Center	
		17:00	Host family Pick up	
6-Jul	Fri	8:30	Meet at City Hall Leave for Uzumasa Movie Park	
		12:00	Visit Taiwa gakuen Culinary Professional School	
			Cooking experience/ Lunch	
		14:00	Arashiyama sightseeing * Monkey Park/ Bamboo street	
		17:00	Host family pick up	
7-Jul	Sat		Hostfamily day	
8-Jul	Sun		Hostfamily day	
9-Jul	Mon	8:30	Meet at City Hall Leave for Nara & Osaka sightseeing	
			Dinner at Osaka	
		20:00	Host family Pick up	
10-Jul	Tue	9:00	Meet at City hall	
		9:30	Yokoji Temple * Monk experience	
		12:00	Lunch at Italian restaurant	
		13:15	Otokuni High School * Water Polo experience	Bathing suits & slippers/towel
		15:00	Walk to Izumiya *Shopping & rest	
		17:00	Host family Pick up	
		19:00	Karaoke night! * hosted by all host families	
		21:00	Host family Pick up	
11-Jul	Wed	8:30	#10 Elementary School * Exchange Program	Room shoes
			School Lunch	
		15:00	Join After school activity	
		16:00	Host family Pick up	
12-Jul	Thu	8:30	Nishiotokuni High School *Exchange Program	B Shirt & pants or skirt
		17:00	Host family Pick up	Room shoes/T shirts& shorts
13-Jul	Fri	8:30	#4 JHS * Exchange Program	B Shirt & pants or skirt
		17:00	Host family Pick up	Room shoes/T shirts& shorts
		19:00	Farewell Party @ Sangyo bunka kaikan	
		21:00	Back home	
14-Jul	Sat		Host family Day	

15-Jul	Sun	11:30	Meet at Teisan Bus Terminal	
		14:35	Leave for Narita by JAL3006	

Student Deluxe Protection Plan

Arlington To Japan
07/03/2018 - 07/15/2018
20 travelers
Group Policy Number 90805
No Trip Cancellation

Worldwide Non-Insurance Assistance Services

The Travel Assistance feature provides a variety of travel related services. Services offered include:

- Medical Evacuation • Medically Necessary Repatriation
- Repatriation of Remains • Medical or Legal Referral
- Inoculation Information • Hospital Admission Guarantee
- Translation Service • Lost Baggage Retrieval
- Passport/Visa Information • Emergency Cash Advance
- Bail Bond • Prescription Drug/Eyeglass Replacement
- ID Theft Resolution Service • Concierge Service • Business Concierge • Non-Medical Emergency Evacuation

Payment reimbursement to the Assistance Company is Your responsibility.

24/7 Worldwide Non-Insurance Assistance Services
Travel Assistance, Medical Emergency,
Concierge Service, Business Concierge,
Non-Medical Emergency Evacuation Service,
and ID Theft Resolution Service

FOR EMERGENCY ASSISTANCE DURING YOUR TRIP
CALL:

888-268-2824

OR CALL COLLECT:
603-328-1725

(From all other locations)

Travel assistance services are provided by an independent organization and not by United States Fire Insurance Company or Travel Insured International. There may be times when circumstances beyond the Assistance Company's control hinder their endeavors to provide travel assistance services. They will, however, make all reasonable efforts to provide travel assistance services and help You resolve Your emergency situation.

Administered by



**TRAVEL INSURED
INTERNATIONAL**
A CRUM & FORSTER COMPANY

Quality Protection Worldwide

For questions or to report a claim, contact:
Travel Insured International, Inc.

855 Winding Brook Drive
Glastonbury, CT 06033
Customer Care-866-684-0218
Claims-800-243-2440

AVAILABILITY OF SERVICES

You are eligible for information and concierge services at any time after You purchase this plan. The Emergency Assistance Services become available when You actually start Your Covered Trip. Emergency Assistance, Concierge and Informational Services end the earliest of: midnight on the day the program expires; when You reach Your return destination; or when You complete Your Covered Trip. The Identity Theft Resolution Services become available on Your scheduled departure date for Your Covered Trip. Services are provided only for an Identity Theft event which occurs while on Your Covered Trip. Identity Theft Resolution does not guarantee that its intervention on behalf of You will result in a particular outcome or that its efforts on behalf of You will lead to a result satisfactory to You. Identity Theft Resolution does not include and shall not assist You for thefts involving non-US bank accounts.

IDENTITY THEFT RESOLUTION SERVICES

In the event of an Identity Theft event while on Your Covered Trip, Travel Insured's designated provider will provide you with the support and tools needed for You to restore Your identity to pre-event status. Assistance includes contacting Your creditors to notify them of the event and to request replacement cards; connecting you with a friend or family member at home and providing them with the assistance to set up a transfer or wire of funds; information on how to contact the three major credit bureaus; guidance on how to obtain a police report; and providing You with a guide on how to restore Your credit.

CONCIERGE SERVICES

Concierge Services are provided by Travel Insured's designated provider. There is no charge for the services provided by the provider. You are responsible for the cost of services provided and charged for by third parties and for the actual cost of merchandise, entertainment, sports, tickets, food and beverages and other disbursement items. Services offered include: • Destination Profiles • Epicurean Needs • Event Ticketing • Floral Services • Tee Time Reservations • Hotel Accommodations • Meet-And-Greet Services • Shopping Assistance Services • Pre-Trip Assistance • Procurement of Hard-To-Find Items • Restaurant Referrals and Reservations • Rental Car Reservations • Airline Reservations

NON-MEDICAL EMERGENCY EVACUATION

If you require Non-Medical Emergency Evacuation, the Assistance Service will arrange and pay for evacuation from a safe departure point to the nearest safe location. You must contact the Assistance Service as soon as possible after Your Host Country issues the official disaster declaration, as delays may make safe transportation impossible. The method of transportation will be as deemed most appropriate to ensure Your safety. If evacuation becomes impractical due to hostile or dangerous conditions, the Assistance Service will maintain contact with and advise You until evacuation becomes viable or the natural disaster situation or the political or social upheaval has been resolved. Benefit is subject to the terms and conditions of the plan and as determined by the Assistance Service's security personnel, in accordance with local and U.S. authorities. Services rendered without the Assistance Service's coordination and approvals are not covered. No claims for reimbursement will be accepted. If You are able to leave the Your host country by normal means, the Assistance Service will assist you in rebooking flights or other transportation. Expenses for non-emergency transportation are Your responsibility.

BUSINESS CONCIERGE SERVICES

Concierge Services are provided by Travel Insured's designated provider. There is no charge for the services provided by the provider. You are responsible for the cost of services provided and charged for by third parties. Services offered include: • Emergency Correspondence And Business Communication Assistance • Assistance With Locating Available Business Services Such As:

T-19128

8.15.2017

Express/Overnight Delivery Sites, Internet Cafes,
Print/Copy Services • Assistance With Or Arrangements
For Telephone And Web Conferencing • Emergency
Messaging To Customers, Associates, And Others (Phone,
Fax, E-mail, Text, etc.) • Real Time Weather, Travel Delay
And Flight Status Information • Worldwide Business
Directory Service For Equipment Repair/Replacement,
Warranty Service, etc. • Emergency Travel Arrangements

Claims Procedures

To facilitate prompt claims settlement:

TRIP CANCELLATION/TRIP INTERRUPTION:

IMMEDIATELY Call Your Travel Supplier and Travel
Insured International to report Your cancellation and avoid
non-Covered Expenses due to late reporting. Travel
Insured International will then advise You on how to obtain
the appropriate form to be completed by You and the
attending Physician. If You are prevented from taking Your
trip due to Sickness or Injury, You should obtain medical
care immediately. We require a certification by the treating
Physician at the time of Sickness or Injury that medically
imposed restrictions prevented Your participation in the
Trip. Provide all unused transportation tickets, official
receipts, etc.

TRIP DELAY: Obtain any specific dated documentation,
which provides proof of the reason for delay (airline or
Cruise line forms, medical statements, etc).

Submit this documentation along with Your Trip itinerary
and all receipts from additional expenses incurred.

MEDICAL EXPENSES: Obtain receipts from the providers
of service, etc., stating the amount paid and listing the
diagnosis and treatment.

BAGGAGE: Obtain a statement from the Common Carrier
that Your Baggage was delayed or a police report showing
Your Baggage was stolen along with copies of receipts for
Your purchases.

T-19128

8.15.2017

TRAVEL PROTECTION INSURANCE

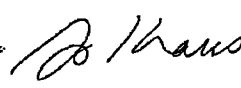
Certificate of Insurance

This Certificate Plan of Insurance describes the insurance
benefits underwritten by United States Fire Insurance
Company, herein referred to as the Company and also
referred to as We, Us and Our. Please refer to the
accompanying Schedule of Benefits, which provides the
Insured, also referred to as You or Your, with specific
information about the program You purchased. You should
contact the Company immediately if You believe that the
Schedule of Benefits is incorrect.

Signed for United States Fire Insurance Company By:



Marc J. Adee
Chairman and CEO



James Kraus
Secretary

Insurance provided by this Certificate is subject to all of the
terms and conditions of the Group Policy. If there is a
conflict between the Policy and this Certificate, the Policy
will govern.

If You are not satisfied for any reason, You may return
Your Certificate to the Company within 14 days after
receipt. Your premium will be refunded, provided You have
not already departed on the Trip or filed a claim. When so
returned, the coverage under the Certificate is void from
the beginning.

Renewal: Coverage under this Certificate is not
renewable.

SHORT TERM COVERAGE

NON-RENEWABLE

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SCHEDULE OF BENEFITS

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SECTION VI. STATE ENDORSEMENTS

SCHEDULE OF BENEFITS

Benefit Per Trip	Maximum Benefit Amount
Travel Arrangement Protection	
Trip Cancellation**	Trip Cost*
Trip Interruption**	150% of Trip Cost*
Missed Connection (3 hours)	\$500
Travel Delay (6 hours)	\$750 (\$150/day)

Travel Arrangement Protection

Trip Cancellation**	Trip Cost*
Trip Interruption**	150% of Trip Cost*
Missed Connection (3 hours)	\$500
Travel Delay (6 hours)	\$750 (\$150/day)

*Up to the trip cost protected, up to the maximum of
\$10,000

**For a \$0 Trip Cost, there is no Trip Cancellation and Trip
Interruption is limited to \$500 Return Air only

Baggage and Personal Effects	\$1,500
Per Article Limit	\$300
Combined Articles Limit	\$500
Baggage Delay (24 hours)	\$300
Non-Medical Emergency Evacuation	\$150,000

Medical Protection

Accident & Sickness Medical Expense	\$25,000
Emergency Medical Evacuation	\$100,000
Medically Necessary Repatriation/	
Repatriation of Remains	

Optional Coverage

Applicable only when specifically requested on the application and the appropriate additional premium has been paid and purchase confirmed on Your Confirmation of Benefits.

Cancel For Any Reason

*Up To 75% of Non-Refundable Trip Cost****

****The lesser of 75% of the amount prepaid for the Trip or up to the maximum of \$10,000*

SECTION I. COVERAGES

COVERAGE A

TRIP CANCELLATION

Benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, to reimburse You for the amount of the Published Penalties and unused non-refundable Prepaid Payments You paid for Travel Arrangements when You are prevented from taking Your Trip due to:

1. Your or a Family Member's or a Traveling Companion's or a Business Partner's death, which occurs before departure on Your Trip;
2. Your or a Family Member's or a Traveling Companion's or a Business Partner's covered Sickness or Injury, which:
 - a) occurs before departure on Your Trip, b) requires Medical Treatment at the time of cancellation resulting in medically imposed restrictions, as certified by a Legally Qualified Physician, and c) and prevents Your participation in the Trip;
3. For the **Other Covered Reasons** listed below; provided such circumstances occur while coverage is in effect.

"Other Covered Reasons" means:

- a. You or Your Traveling Companion being hijacked, quarantined, required to serve on a jury (notice of jury duty must be received after Your Effective Date), served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
- b. Your or Your Traveling Companion's primary place of residence or destination being rendered uninhabitable by

fire, flood, burglary or other Natural Disaster. The Company will only pay benefits for Losses occurring within 30 calendar days after the Natural Disaster makes your destination accommodations uninhabitable. Your destination is uninhabitable if: the building structure itself is unstable and there is a risk of collapse in whole or in part; (ii) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail, or flood; (iii) immediate safety hazards have yet to be cleared such as debris on roofs or downed electrical lines; or (iv) the rental property is without electricity or water. Benefits are not payable if a storm, snow storm, blizzard or hurricane is named on or before the Effective Date of Your Trip Cancellation coverage;

- c. a documented theft of passports or visas
- d. You or Your Traveling Companion being directly involved in a traffic accident, substantiated by a police report, while en route to Your scheduled point of departure;
- e. Bankruptcy or Default of an airline, cruise line, tour operator or other travel provider (other than the

Travel Supplier, tour operator or travel agency, from whom You purchased Your Travel Arrangements causing a complete cessation of travel services more than 14 days following Your Effective Date. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination. This benefit only applies if the Certificate has been purchased within 14 days of the date Your initial deposit/payment for Your Trip is received; and You insure the full cost of Your Trip subject to penalties or restrictions;

- f. unannounced Strike that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- g. Inclement Weather that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- h. felonious assault of You or Your Traveling

Companion within 10 days of the Scheduled Departure Date;

- i. a Terrorist Incident that occurs within 30 days of Your Scheduled Departure Date in a city listed on the itinerary of Your Trip. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing Your cancellation of Your Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- j. Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them;

All cancellations must be reported to the Travel Supplier within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, the event should be reported as soon as possible. All other delays of reporting beyond 72 hours will result in reduced benefit payments.

If Your Travel Supplier cancels Your Trip, a benefit will be paid for the reissue fee charged by the airline for the tickets. The maximum payable under this Trip Cancellation Benefit is the lesser of the total amount of coverage You purchased or the Maximum Benefit Amount shown in the Schedule of Benefits.

Single Supplement

Benefits will be paid, up to the Maximum Benefit Amount, for the additional cost incurred as a result of a change in the per person occupancy rate for Prepaid Travel Arrangements if a Traveling Companion's or Family Member's Trip is canceled for a covered reason and You do not cancel Your Trip.

These benefits will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

COVERAGE B TRIP INTERRUPTION

Benefits will be paid, up to a) the Maximum Benefit Amount shown in the Schedule of Benefits ; or b) 150% of the total amount of coverage You purchased, to reimburse You for or unused non-refundable land or water Travel Arrangements plus the Additional Transportation Cost paid:

1. to join Your Trip if You must depart after Your Scheduled Departure Date or travel via alternate travel arrangements by the most direct route possible to reach Your Trip destination; or
2. to rejoin Your Trip or transport You to Your originally scheduled return destination, if You must interrupt Your Trip after departure, each by the most direct route possible.

Trip Interruption must be due to:

1. Your or a Family Member's or a Traveling Companion's or a Business Partner's death, which occurs while You are on Your Trip;
2. Your or a Family Member's or a Traveling Companion's or a Business Partner's covered Sickness or Injury which: a) occurs while You are on Your Trip, b) requires Medical Treatment at the time of interruption resulting in medically imposed restrictions, as certified by a Legally Qualified Physician, and c) prevents Your continued participation on Your Trip;
3. For the **Other Covered reasons** listed below; provided such circumstances occur while coverage is in effect.

"Other Covered reasons" means:

- a. You or Your Traveling Companion being hijacked, quarantined, required to serve on a jury (notice of jury duty must be received after Your Effective Date), served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
4. T210-CER

- b. Your or Your Traveling Companion's primary place of residence or destination being rendered uninhabitable by fire, flood, burglary or other Natural Disaster. The Company will only pay benefits for Losses occurring within 30 calendar days after the Natural Disaster makes your destination accommodations uninhabitable. Your destination is uninhabitable if: (i) the building structure itself is unstable and there is a risk of collapse in whole or in part; (ii) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail, or flood; (iii) immediate safety hazards have yet to be cleared such as debris on roofs or downed electrical lines; or (iv) the rental property is without electricity or water. Benefits are not payable if a storm, snow storm, blizzard or hurricane is named on or before the Effective Date of Your Trip Cancellation coverage;
- c. a documented theft of passports or visas;
- d. You or Your Traveling Companion being directly involved in a traffic accident, substantiated by a police report, while en route to Your scheduled point of departure;
- e. Bankruptcy or Default of an airline, cruise line, tour operator or other travel provider (other than the Travel Supplier, tour operator or travel agency, from whom You purchased Your Travel Arrangements causing a complete cessation of travel services more than 14 days following Your Effective Date. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination. This benefit only applies if the Certificate has been purchased within 14 days of the date Your initial deposit/payment for Your Trip is received; and You insure the full cost of Your Trip subject to penalties or restrictions;
- f. unannounced Strike that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- g. Inclement Weather that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- h. felonious assault of You or Your

- Traveling Companion within 10 days of the Scheduled Departure Date;
- i. a Terrorist Incident that occurs within 30 days of Your Scheduled Departure Date in a city listed on the itinerary of Your Trip. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing Your cancellation of Your Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- j. Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them;

Additional Trip Interruption Benefits:

If Your Traveling Companion must remain hospitalized, benefits will also be paid for reasonable accommodation, telephone call and local transportation expenses incurred by You to remain with Your Traveling Companion up to \$200 per day, limited to 10 days.

The maximum payable under this Trip Interruption Benefit is the lesser of 150% of the total amount of coverage You purchased or 150% of the Maximum Benefit Amount shown in the Schedule of Benefits.

Single Supplement

Benefits will be paid, up to the Maximum Benefit Amount, for the additional cost incurred as a result of a change in the per person occupancy rate for Prepaid Travel Arrangements if a Traveling Companion's or Family Member's Trip is interrupted for a Covered Reason and You do not interrupt Your Trip.

These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE C MISSED CONNECTION

If You miss Your cruise or tour departure because Your arrival at Your Trip destination is delayed for 3 or more hours, due to:

- a) any delay of a Common Carrier (the delay must be certified by the Common Carrier);
- b) documented weather condition preventing You from getting to the point of departure;

- c) quarantine, hijacking, Strike, Natural Disaster, terrorism or riot.

We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for:

- a) Your Additional Transportation Cost to join Your Trip; and
- b) Your Prepaid expenses for the unused land or water Travel Arrangements ; and
- c) reasonable accommodation, telephone and meal expenses necessarily incurred by You for which You have proof of purchase and which were not paid for or provided by any other source.

These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGED TRAVEL DELAY

Benefits will be paid up to \$150 per day for: 1) the non-refundable, unused portion of the Prepaid expenses for Your Trip as long as the expenses are supported by proof of purchase and are not reimbursable by any other source; and 2) reasonable accommodation, meal, telephone call and local transportation expenses incurred by You , up to the Maximum Benefit Amount shown in the Schedule of Benefits, if You are delayed for 6 hours or more while en route to or from, or during Your Trip, due to:

- a) any delay of a Common Carrier (the delay must be certified by the Common Carrier);
- b) a traffic accident in which You or Your Traveling Companion is not directly involved (must be substantiated by a police report);
- c) lost or stolen passports, travel documents or money (must be substantiated by a police report);
- d) quarantine, hijacking, Strike, Natural Disaster, terrorism or riot;
- e) a documented weather condition preventing You from getting to the point of departure. Benefits will not be paid for any expenses, which have been reimbursed, or for any services that have been provided by the

Common Carrier.

These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE E BAGGAGE AND PERSONAL EFFECTS

Benefits will be provided to You, up to the Maximum Benefit Amount shown in the Schedule of Benefits:

- a) against all risks of permanent loss, theft or damage to Your Baggage and Personal Effects;
- b) subject to all General Exclusions and the Additional Limitations and Exclusions Specific to Baggage and Personal Effects in the Certificate; and
- c) occurring while coverage is in effect.

"Baggage and Personal Effects" means goods being used by You during Your Trip.

Valuation and Payment of Loss:

The lesser of the following amounts will be paid:

- 1) the Actual Cash Value at the time of loss, theft or damage, except as provided below;
- 2) the cost to repair or replace the article with material of a like kind and quality; or
- 3) \$300 per article.

A combined maximum of \$500 will be paid for jewelry; precious or semi-precious stones; watches; articles consisting in whole or in part of silver, gold or platinum; furs or articles trimmed with fur; cameras and their accessories and related equipment.

A maximum of \$100 will be paid for the cost of replacing a passport or visa.

A maximum of \$100 will be paid for the cost associated with the unauthorized use or replacement of lost or stolen credit cards, subject to verification that You have complied with all conditions of the credit card company.

Baggage and Personal Effects does not include:

- 1) animals;
- 2) automobiles and automobile equipment;
- 3) boats or other vehicles or conveyances;
- 4) trailers;

- 5) motors;
- 6) aircraft;
- 7) bicycles, except when checked as baggage with a Common Carrier;
- 8) household effects and furnishings;
- 9) antiques and collector's items;
- 10) sunglasses, contact lenses, artificial teeth, dentures, dental bridges, or hearing aids;
- 11) artificial limbs or other prosthetic devices;
- 12) prescribed medications;
- 13) keys, money, stamps and credit cards (except as otherwise specifically covered herein);
- 14) securities, stamps, tickets and documents (except as coverage is otherwise specifically provided herein);
- 15) telephones or PDA devices, computer hardware or software;

Baggage Delay: If, while on a Trip, Your checked baggage is delayed or misdirected by a Common Carrier for more than 24 hours from Your time of arrival at a destination other than Your return destination, benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the actual expenditure for necessary personal effects. You must be a ticketed passenger on a Common Carrier. The Common Carrier must certify the delay or misdirection. Receipts for the purchases must accompany any claim.

Additional Limitations and Exclusions Specific to Baggage and Personal Effects:

Benefits are not payable for any loss caused by or resulting from:

- a) breakage of brittle or fragile articles;
- b) wear and tear or gradual deterioration;
- c) confiscation or appropriation by order of any government or custom's rule;
- d) theft or pilferage while left in any unlocked or unattended vehicle;
- e) property illegally acquired, kept, stored or transported;
- f) Your negligent acts or omissions; or
- g) property shipped as freight or shipped prior to the Scheduled Departure Date;
- h) electrical current, including electric arcing that damages or destroys electrical devices or appliances.

Additional Provisions applicable to Baggage and Personal Effects and Baggage Delay:

Benefits will not be paid for any expenses which have been reimbursed or for any services which have been provided by the Common Carrier, hotel or Travel Supplier; nor will benefits be paid for loss or damage to property specifically scheduled under any other insurance.

Additional Claims Provisions Specific to Baggage:

Your Duties After Loss of or Damage to Property or Delay of Baggage: In case of loss, theft, damage or delay of baggage or personal effects, and You must:

- a) take all reasonable steps to protect, save or recover the property;
- b) promptly notify, in writing, either the police, hotel proprietors, ship lines, airlines, railroad, bus, airport or other station authorities, tour operators or group leaders, or any Common Carrier or bailee who has custody of Your property at the time of loss;
- c) produce records needed to verify the claim and its amount, and permit copies to be made;
- d) send proof of loss as soon as reasonably possible after date of loss, providing date, time, and cause of loss, and a complete list of damaged/lost items ; and
- e) allow the company to examine baggage or personal effects, if requested.

These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

**COVERAGE F
NON-MEDICAL EMERGENCY EVACUATION**

This Non-Medical Emergency Evacuation Benefit is not available if a formal recommendation in the form of a Travel Advisory or Travel Warning from the U.S. State Department is issued for a country preceding Your arrival into that country on Your Trip, or if a country is an Excluded Country preceding Your arrival into that country on Your Trip.

You are eligible for benefits, up to the Maximum Benefit Amount shown in the Confirmation of Benefits, for all reasonable expenses incurred for Your transportation to the nearest place of safety, or to Your primary place of residence, if You must leave Your Trip for a Non-Medical Emergency Evacuation Covered reason, as defined below.

Non-Medical Emergency Evacuation must occur within 14 days of any covered event. Arrangements will be by the most appropriate and economical means available and consistent with Your health and safety. Benefits are only payable for arrangements made by authorized travel assistance provider".

Non-Medical Emergency Evacuation Covered reasons:

We will pay for the Non-Medical Emergency Evacuation Benefits listed above if, while on Your Trip, a formal recommendation in the form of a Travel Advisory or Travel Warning from the U.S. State Department, is issued for You to leave a country You are visiting on Your Trip due to:

- 1) a Natural Disaster;
- 2) civil, military or political unrest; or
- 3) Your being expelled or declared a persona non-grata by a country You are visiting on Your Trip.

Non-Medical Emergency Evacuation Exclusions: We do not cover:

- 1) loss or expense for a Non-Medical Emergency Evacuation Covered reason which took place in an Excluded Country;
- 2) loss or expense recoverable under any other insurance or through an employer;
- 3) loss or expense arising from or attributable to:
 - (a) fraudulent or criminal acts committed or attempted by You ;
 - (b) alleged violation of the laws of the country You are visiting, unless We determine such allegations to be fraudulent, or
 - (c) failure to maintain required documents or visas;
- 4) loss or expense arising from or attributable to:
 - (a) debt, insolvency, business or commercial failure;
 - (b) the repossession of any property; or
 - (c) Your non-compliance with a contract, license or permit;
- 5) loss or expense arising from or due to liability assumed by You under any contract.

These benefits will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

**COVERAGE G
ACCIDENT & SICKNESS MEDICAL EXPENSE**

Benefits will be paid for the Covered Expense incurred, up to the Maximum Benefit Amount shown in the Schedule of Benefits shown on the Schedule of Benefits, as a result of

a Covered Accidental Injury or covered Sickness, which first occurs during Your Trip (of a duration of 90 days or less for Sickness). Only Covered Expenses incurred during Your Trip (of duration of 90 days or less for Sickness) will be reimbursed. Expenses incurred after Your Trip are not covered.

Benefits will include up to \$750 for expenses for emergency dental treatment due to Injury to natural teeth. Only expenses for emergency dental treatment to natural teeth incurred during Your Trip will be reimbursed. Expenses incurred after Your Trip are not covered.

Benefits will not be paid in excess of the Usual and Customary Charges.

Advance payment will be made to a Hospital, up to the Maximum Benefit Amount, if needed to secure Your admission to a Hospital, because of a Covered Accidental Injury or covered Sickness. The authorized travel assistance company will coordinate advance payment to the Hospital.

For the purpose of this benefit:

"Covered Expense" means expense incurred only for the following:

1. The medical services, prescription drugs, prosthetics, therapeutic services and supplies ordered or prescribed by a Legally Qualified Physician as Medically Necessary for treatment;
2. Hospital or ambulatory medical-surgical center services (including expenses for a cruise ship cabin or hotel room, not already included in the cost of the Your Trip, if recommended as a substitute for a hospital room for recovery from a Covered Accidental Injury or covered Sickness);
3. Transportation furnished by a professional ambulance company to and/or from a Hospital.

These benefits will not duplicate any benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE H EMERGENCY MEDICAL EVACUATION, MEDICAL REPATRIATION AND RETURN OF REMAINS

When You suffer loss of life for any reason or incur a Sickness or Injury during the course of Your Trip, the following benefits are payable, up to the Maximum Benefit Amount shown in the Schedule of Benefits.

1. Emergency Medical Evacuation: If the local attending Legally Qualified Physician and the authorized travel assistance company determine that transportation to a Hospital or medical facility is Medically Necessary to treat an unforeseen Sickness or Injury which is acute or life threatening and adequate Medical Treatment is not available in the immediate area, the Transportation Expense incurred will be paid for the Usual and Customary Charges for transportation to the closest Hospital or medical facility capable of providing that treatment. If You are traveling alone and will be hospitalized for more than 7 consecutive days and Emergency Evacuation is not imminent, benefits will be paid to transport one person, chosen by You, by Economy Transportation, for a single visit to and from Your bedside.

If You are in the Hospital for more than 7 consecutive days and Your dependent children who are under 18 years of age and accompanying You on Your Trip are left unattended, Economy Transportation will be paid to return the dependents to their home (with an attendant, if considered necessary by the authorized travel assistance company).

2. Medical Repatriation: If the local attending Legally Qualified Physician and the authorized travel assistance company determine that it is Medically Necessary for You to return to Your primary place of residence because of an unforeseen Sickness or Injury which is acute or life-threatening, the Transportation Expense incurred will be paid for Your return to Your primary place of residence or to a Hospital or medical facility closest to Your primary place of residence capable of providing continued treatment via one of the following methods of transportation, as approved, in writing, by the authorized travel assistance company:

- i) one-way Economy Transportation;
- ii) commercial air upgrade (to Business or First Class), based on Your condition as recommended by the local attending Legally Qualified Physician and verified in writing

and considered necessary by the authorized travel assistance company; or

iii) other covered land or air transportation including, but not limited to, commercial stretcher, medical escort, or the Usual and Customary Charges for air ambulance, provided such transportation has been pre-approved and arranged by the authorized travel assistance company. Transportation must be via the most direct and economical route.

3. Return of Remains: In the event of Your death during a Trip, the expense incurred will be paid for minimally necessary casket or air tray, preparation and transportation of Your remains to Your primary place of residence in the United States of America or to the place of burial.

Benefits are paid less the value of Your original unused return travel ticket.

These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE I OPTIONAL CANCEL FOR ANY REASON

Not applicable for \$0 Trip Costs

Optional Coverage: Applicable only when purchased within at the time of original plan purchase and if the appropriate additional premium has been paid.

If You cancel Your Trip for any reason not otherwise covered by this plan, benefits will be paid for up to 75% of the Prepaid, forfeited, non-refundable Payments or Deposits You paid for Your Trip provided:

- a) Your Payment or Deposit for this plan is received with or before the final Payment for Your Trip; and
- b) You have paid the Travel Supplier for the full cost for all non-refundable Trip costs for Your Trip prior to Your cancellation of Your Trip; and
- c) You cancel Your Trip 48 hours or more before Your Scheduled Departure.

SECTION II. DEFINITIONS

Accident means a sudden, unexpected unusual specific event that occurs at an identifiable time and place, and shall also include exposure resulting from a mishap to a conveyance in which You are traveling.

Additional Transportation Cost means the actual cost incurred for one-way Economy Transportation by Common Carrier reduced by the value of an unused travel ticket.

Baggage and Personal Effects means luggage, personal possessions and travel documents taken by You on Your Trip.

Bankruptcy or Default means the total cessation of operations due to insolvency, with or without the filing of a bankruptcy petition by an airline or cruise line, tour operator or other travel provider provided the Bankruptcy or Default occurs more than 14 days following Your Effective Date for the Trip Cancellation Benefits. There is no coverage for the Bankruptcy or Default of any person, organization, agency or firm from whom You purchased Travel Arrangements supplied by others.

Business Partner means an individual who (a) is involved in a legal general partnership with You and (b) is actively involved in the day to day management of Your business.

Common Carrier means any land, sea, or air conveyance operating under a valid license for the transportation of passengers for hire, not including taxicabs or rented, leased or privately owned motor vehicles.

"Complications of Pregnancy" means conditions (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include non-elective cesarean section, ectopic pregnancy which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.

Complications of Pregnancy does not include false labor, occasional spotting, Physician-prescribed rest during the period of pregnancy, morning sickness, hyperemesis gravidarum, preeclampsia and similar conditions associated with the management of a difficult pregnancy

not constituting a nosologically distinct complication of pregnancy.

Company means United States Fire Insurance

Covered Trip means scheduled trips, tours or Cruises for which (a) coverage is requested; and (b) the required premium is submitted prior to the Scheduled Departure Date.

Cruise means any prepaid sea arrangements.

Default means a material failure or inability to provide contracted services.

Dependent Child(ren) means Your children, including an unmarried child, stepchild, legally adopted child or foster child who is: (1) less than age 19 and primarily dependent on You for support and maintenance; or (2) who is at least age 19 but less than age 23 and who regularly attends an accredited school or college; and who is primarily dependent on You for support and maintenance. **Domestic Partner** means an opposite or same sex partner who, for at least 12 consecutive months, has resided with You and shared financial assets/obligations with You. Both You and the Domestic Partner must:

(1) intend to be life partners;

(2) be at least the age of consent in the state in which You both reside; and (3) be mentally competent to contract. Neither You nor the Domestic Partner can be related by blood to a degree of closeness that would prohibit a legal marriage, be married to anyone else, or have any other Domestic Partner. The Company may require proof of the Domestic Partner relationship in the form of a signed and completed affidavit of domestic partnership.

Economy Transportation means the lowest published available transportation rate for a ticket on a Common Carrier matching the original class of transportation that You purchased for Your Trip.

Excluded Country means one of the following countries from which Non-Medical Emergency Evacuations are not available such as Afghanistan, Chechnya, Democratic Republic of the Congo, Iran, Iraq, Israel West Bank, Israel Gaza Strip, Ivory Coast, North Korea, Somalia, Sudan, Syria, or any country subject to the administration and enforcement of U.S. economic embargoes and trade sanctions by the OFFICE OF FOREIGN ASSET CONTROLS (OFAC).

Family Member means any of the following: Your or Your Traveling Companion's legal spouse (or common-law spouse where legal), legal guardian or ward, son or

daughter (adopted, foster, step or in-law), brother or sister (includes step or in-law), parent (includes step or in-law), grandparent (includes in-law), grandchild, aunt, uncle, niece or nephew or Domestic Partner.

Hospital means (a) a place which is licensed or recognized as a general hospital by the proper authority of the state in which it is located; (b) a place operated for the care and treatment of resident inpatients with a registered graduate nurse (RN) always on duty and with a laboratory and X-ray facility; (c) a place recognized as a general hospital by the Joint Commission on the Accreditation of Hospitals; (d) other than a residence, a place where treatment in a Hyperbaric chamber can be received. Not included is a hospital or institution licensed or used principally: (1) for the treatment or care of drug addicts or alcoholics; or (2) as a clinic continued or extended care facility, skilled nursing facility, convalescent home, rest home, nursing home or home for the aged.

Inclement Weather means any weather condition that delays the scheduled arrival or departure of a Common Carrier.

Injury or Injuries means bodily harm and/or decompression illness caused by an Accident which: 1) occurs while Your coverage is in effect under the Policy; and 2) requires examination and treatment by a Legally Qualified Physician. The Injury must be the direct cause of loss and must be independent of all other causes and must not be caused by, or result from, Sickness.

Insured means a person(s) who is booked to travel on a Trip, completes the enrollment form and for whom the required premium is paid, also referred to as You and Your. **Intoxicated** means a blood alcohol level that equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where You are located at the time of an incident.

Legally Qualified Physician means a physician: (a) other than You, a Traveling Companion or a Family Member; (b) practicing within the scope of his or her license; and (c) recognized as a physician in the place where the services are rendered.

Maximum Benefit Amount means the maximum amount payable for coverage provided to You as shown in the Schedule of Benefits.

Medical Treatment means examination and treatment by a Legally Qualified Physician for a condition which first manifested itself, worsened or became acute or had symptoms which would have prompted reasonable

person to seek diagnosis, care or treatment.

Medically Necessary means a service which is appropriate and consistent with the treatment of the condition in accordance with accepted standards of community practice.

Natural Disaster means a flood, hurricane, tornado, earthquake, mudslide, tsunami, avalanche, landslide, volcanic eruption, fire, wildfire or blizzard that is due to natural causes.

Payments or Deposits means the cash, check, or credit card amounts actually paid or used for Your Trip.

Certificates, vouchers, discounts, credits, frequent traveler or frequent flyer rewards, miles or points applied (in part or in full) towards the cost of Your Travel Arrangements are not Payments or Deposits as defined herein.

Pre-existing Condition means any Injury, Sickness or condition (including any condition from which death ensues) of You, or Traveling Companion, or Your and/or Traveling Companion's Family Member or Your Business Partner for which within the 180 day period prior to the Effective Date of Your Trip Cancellation coverage under the policy which (a) manifested itself, became acute or exhibited symptoms which would have caused one to seek diagnosis, care or treatment; (b) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or (c) required Medical Treatment or treatment was recommended by a Legally Qualified Physician.

Prepaid means Payments or Deposits paid by You to a Travel Supplier for Travel Arrangements for Your Trip prior to Your actual or Scheduled Departure Date. Payments or Deposits for shore excursions, theater, concert or event tickets or fees, or sightseeing, if such arrangements are made during Your Trip and are to be used prior to the Scheduled Return Date of Your Trip, are not considered Prepaid as defined herein.

Published Penalties means any additional published cancellation penalties levied by Your travel agency or travel supplier that apply to all clients of the travel agency or travel supplier and can be documented at time of Your purchase of Travel Arrangements from Your travel agency. **Scheduled Departure Date** means the date on which You are originally scheduled to leave on Your Trip.

Scheduled Return Date means the date on which You are originally scheduled to return to the point of origin or the

original final destination of Your Trip.

Sickness means an illness or disease of the body which: 1) requires examination and treatment by a Legally Qualified Physician, and 2) commences while Your coverage is in effect. An illness or disease of the body which first manifests itself and then worsens or becomes acute prior to the Effective Date of Your coverage is not a Sickness and is considered a Pre-Existing Condition as defined herein and is not covered by the Policy.

Strike means any labor disagreement resulting in a stoppage of work: (a) as a result of a combined effort of workers which was unannounced and unpublished at the time travel services were purchased; and (b) which interferes with the normal departure and arrival of a Common Carrier.

Terrorist Incident means an act of violence, that is deemed terrorism by the United States Government other than civil disorder or riot (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting alone or in association with other persons on behalf of or in connection with any organization of foreign government which is generally recognized as having the intent to overthrow or influence the control of any other foreign government. The Terrorist Incident must be documented in a Travel Warning issued by the United States' Department of State advising Americans to avoid that certain country.

Third Party means a person or entity other than You or the Company.

Transportation Expense means the cost of Medically Necessary conveyance, personnel, and services or supplies.

Traveling Companion means a person or persons whose names appear with Yours on the same Travel Arrangements and who, during Your Trip, will accompany You.

Travel Supplier means any entity or organization that coordinates or supplies travel services for You.

Trip means a scheduled trip for which coverage for Travel Arrangements is requested and the premium is paid prior to Your actual or Scheduled Departure Date of Your Trip.

Us, We, Our means United States Fire Insurance Company.

Usual and Customary Charges means those comparable charges for similar treatment, services and supplies in the geographic area where treatment is performed.

SECTION III. INSURING PROVISIONS

Who Is Eligible For Coverage:

A citizen or resident of the United States of America who is booked to travel on Your Trip, completes the enrollment form and for whom the required premium is paid. Eligibility for purchase will be determined at time of claim. If it is determined that a person or Trip is not eligible for coverage, any claim for benefits will be denied and premium will be refunded.

When Coverage Begins – Coverage Effective Date:

Trip Cancellation: Coverage begins on the date and time at 12:01 a.m. on the day after the date the appropriate premium for this Certificate for Your Trip is received by the company. This is Your "Effective Date" and time for Trip Cancellation.

Travel Delay: Coverage begins after You have traveled 50 miles or more from home en route to join Your Trip. This is Your "Effective Date" and time for Travel Delay.

All Other Coverages: Coverage begins when You depart on the first Travel Arrangement (or alternate travel arrangement if You must use an alternate travel arrangement to reach Your Trip destination) for Your Trip. This is Your "Effective Date" and time for all other coverages, except Trip Cancellation and Travel Delay.

When Coverage Ends – Coverage Termination Date:

Trip Cancellation: Your coverage automatically ends on the earlier of: 1) 72 hours prior to the scheduled departure time on the Scheduled Departure Date of Your Trip or 2) on or before the final payment due date for Your Trip; or 3) the date and time You cancel Your Trip.

All Other Coverages: Your coverage automatically ends on the earlier of: 1) the date Your Trip is completed; 2) the Scheduled Return Date; 3) Your arrival at Your return destination on a round-trip, or the destination on a one-way trip; 4) cancellation of Your Trip covered by the Certificate. Termination of the Certificate will not affect a claim for loss that occurs after premium has been paid.

All coverages under the Certificate will be extended if Your entire Trip is covered by the Certificate and Your return is delayed due to unavoidable circumstances beyond Your control. If coverage is extended for the above reasons, coverage will end on the earlier of the date You reach Your originally scheduled return destination or 7 days after the Scheduled Return Date.

SECTION IV. GENERAL EXCLUSIONS

Benefits are not payable for any loss due to, arising or resulting from:

1. suicide, attempted suicide or any intentionally self-inflicted injury of You, a Traveling Companion, Family Member or Business Partner booked to travel with You, while sane or insane;
2. an act of declared or undeclared war;
3. participating in maneuvers or training exercises of an armed service, except while participating in weekend or summer training for the reserve forces of the United States, including the National Guard;
4. riding or driving in races, or speed or endurance competitions or events;
5. mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes, or other special equipment);
6. participating in skydiving or parachuting, hang gliding or bungee cord jumping;
7. piloting or learning to pilot or acting as a member of the crew of any aircraft;
8. being Intoxicated as defined herein, or under the influence of any controlled substance unless as administered or prescribed by a Legally Qualified Physician;
9. the commission of or attempt to commit a felony or being engaged in an illegal occupation;
10. normal childbirth or pregnancy (except Complications of Pregnancy) or voluntarily induced abortion; dental treatment (except as coverage is otherwise specifically provided herein);
11. amounts which exceed the Maximum Benefit Amount for each coverage as shown in the Schedule of Benefits;
12. due to a Pre-Existing Condition, as defined in the Policy. The Pre-Existing Condition Limitation does not apply to the Emergency Medical Evacuation or return of remains coverage;
13. medical treatment during or arising from a Trip undertaken for the purpose or intent of securing medical treatment;
14. a mental or nervous condition, unless hospitalized for that condition while the Policy is in effect for You;
15. due to loss or damage (including death or injury) and any associated cost or expense resulting directly from

the discharge, explosion or use of any device, weapon or material employing or involving chemical, biological, radiological or similar agents, whether in time of peace or war, and regardless of who commits the act and regardless of any other sequence thereto.

PRE-EXISTING CONDITION EXCLUSION:

The Company will not pay for any expense as a result of any illness, disease, or other condition during the 180 day period immediately prior to the date Your coverage is effective for which You or Your Traveling Companion, Business Partner or Family Member scheduled or booked to travel with You: 1) received or received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or 2) took or received a prescription for drugs or medicine. Item (2) of this Exclusion does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 180 day period before coverage is effective under this Certificate.

Waiver of the Pre-Existing Condition Exclusion

The exclusion for Pre-Existing Condition will be waived provided:

- a) Your Payment or Deposit for this Certificate and enrollment form are received at or before the final Payment due date for Your Trip; and
- b) You insure all Prepaid Trip costs that are subject to cancellation penalties or restrictions; and
- c) You are not disabled from travel at the time Your premium is paid.

SECTION V. GENERAL PROVISIONS

Notice of Claim: Notice of claim must be reported within 20 days after a loss occurs or as soon as is reasonably possible. You or someone on Your behalf may give the notice. The notice should be given to Us or Our designated representative and should include sufficient information to identify You.

Claim Forms: When notice of claim is received by Us or Our designated representative, forms for filing proof of loss will be furnished. If these forms are not sent within 15 days, the proof of loss requirements can be met by You sending Us a written statement of what happened. This statement must be received within the time given for filing proof of loss.

Proof of Loss: Proof of loss must be provided within 90 days after the date of the loss or as soon as is reasonably possible. Proof must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

Time Payment of Claims: We, or Our designated representative, will pay the claim after receipt of acceptable proof of loss.

Payment of Claims: Benefits for loss of life will be paid to Your designated beneficiary. If a beneficiary is not otherwise designated by You, benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

- a) Your spouse;
- b) Your child or children jointly;
- c) Your parents jointly if both are living or the surviving parent if only one survives;
- d) Your brothers and sisters jointly; or
- e) Your estate.

All other Benefits will be paid directly to You, unless otherwise directed. Any accrued benefits unpaid at Your death will be paid to Your estate. If You have assigned Your benefits, We will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment. All or a portion of all benefits provided by the Certificate may, at Our option, be paid directly to the provider of the service(s) to You. All benefits not paid to the provider will be paid to You.

Subrogation: If the Company has made a payment for a loss under this Certificate, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right. You shall help the Company exercise the Company's rights in any reasonable way that the Company may request: nor do anything after the loss to prejudice the Company's rights; and in the event You recover damages from the Third Party responsible for the loss, You will hold the proceeds of the recovery for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss.

Physician Examination and Autopsy: The Company, at the expense of the Company, may have You examined when and as often as is reasonable while the claim is pending. The Company may have an autopsy done (at the expense of the Company) where it is not forbidden by law. **Legal Actions:** All Certificate terms will be interpreted under the laws of the state in which the Policy was issued. No legal action may be brought to recover on the Certificate within 60 days after written Proof of Loss has been furnished. No legal action for a claim may be brought against Us after 3 years from the time written Proof of Loss is required to be furnished.

Concealment and Misrepresentation: The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance or claim has been concealed or misrepresented.

Other Insurance with the Company: You may be covered under only one travel Certificate with the Company for each Trip. If You are covered under more than one such Certificate, You may select the coverage that is to remain in effect. In the event of death, the selection will be made by the beneficiary or estate. Premiums paid (less claims paid) will be refunded for the duplicate coverage that does not remain in effect.

Reductions in the Amount of Insurance: The applicable benefit amount will be reduced by the amount of benefits, if any, previously paid for any loss or damage under this Certificate for Your Trip.

SECTION VI. STATE ENDORSEMENTS

These Amendatory Endorsements are attached to and made a part of the Policy issued to the Group and Blanket Accident and Health Trust (the Policyholder).

The Amendatory Endorsements are attached to and made a part of the Certificate issued to the Insured. The provisions of the Amendatory Endorsements are effective on the Effective Date and will expire concurrently with the Certificate, unless otherwise terminated.

ARKANSAS

The Policy/Certificate are hereby amended for Arkansas as follows:

1. The Legal Actions provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Legal Actions: All policy terms will be interpreted under the laws of the state in which the policy was issued. Legal action or suit for a claim may be brought against Us within the time allowed by law.

2. The Subrogation provision appearing in SECTION V General Provisions is amended to include this sentence which will appear as follows at the end of the provision:

The Company is entitled to recovery only after You have the Insured has been fully compensated for the loss sustained.

If there is a conflict between the Policy/Certificate and this Rider, the terms of this Endorsement will govern. T210-AE AR

COLORADO

This Amendatory Endorsement is attached to and made a part of the Policy and or Certificate issued to the Insured. The provisions of this Amendatory Endorsement are effective on the Effective Date and will expire concurrently with the Policy, unless otherwise terminated.

The DEFINITIONS section of the policy is amended to include the following:

Dependent means a spouse, a partner in a civil union, and unmarried child under nineteen years of age, an unmarried child who is a full-time student under twenty-four years of age and who is financially dependent upon the parent, and an unmarried child of any age who is medically certified as disabled and dependent upon the parent. "Dependent" shall include a designated beneficiary, as defined in section 15-22-103 (1), C.R.S., if an employer elects to cover a designated

beneficiary as a dependent.

If there is a conflict between the Policy and this Endorsement, the terms of this Endorsement will govern. All other terms and conditions of the policy remain unchanged. T210-AE-CO

CONNECTICUT

The Certificate is hereby amended for Connecticut Residents as follows:

1. The following is added to the Face Page of the Certificate:

Upon request by an Insured, the Master Group Policy, situated in Illinois, is available for examination.

2. The following Exclusion 4. in SECTION IV GENERAL EXCLUSIONS is deleted and replaced as follows:

4. no indemnity will be paid for loss caused by the voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless as prescribed by the Insured's Legally Qualified Physician;

3. Exclusion 19. in SECTION IV GENERAL EXCLUSIONS referencing chemical, biological, radiological or similar agents is deleted in its entirety and will not appear.

4. The Excess Insurance provision in SECTION V GENERAL PROVISIONS is deleted and will not appear.

5. The Subrogation provision in SECTION V GENERAL PROVISIONS is deleted and replaced as follows:

Subrogation: If the Company has made a payment for a loss under this coverage, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right as permitted by law. You shall help the Company exercise the Company's rights in any reasonable way that the Company may request; nor do anything after the loss to prejudice the Company's rights; and in the event You recover damages from the Third Party responsible for the loss, You will hold the proceeds of the recover for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss, as permitted by law.

6. The following is added to SECTION V GENERAL PROVISIONS:

Required Connecticut Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for which the required premium payment has been paid prior to that termination date will continue until the end of Your Trip.

7. SECTION VI COORDINATION OF BENEFITS is deleted in its entirety and will not appear.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE CT

DISTRICT OF COLUMBIA

The Certificate is hereby amended for District of Columbia as follows:

1. The following will appear at the bottom of the Cover Page, directly above the TABLE OF CONTENTS:
LIMITED BENEFIT COVERAGE

2. SECTION V GENERAL PROVISIONS is amended to include the following provisions:

Fraud Warning as required for District of Columbia Residents: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits, if false information materially related to a claim was provided by the applicant.

Required District of Columbia Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for which the required premium payment has been paid prior to that termination date will continue until the end of Your Trip.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE DC

FLORIDA

The Policy/Certificate are hereby amended for Florida Residents as follows:

The Legal Actions provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Legal Actions: No legal action may be brought to recover on the Policy until 60 days after the Company receives Proof of Loss. No legal action for a claim may be brought against Us more than 5 years after the time required by law for giving Proof of Loss. This 5 year time period is extended from the date Proof of Loss is furnished and the date the claim is denied in whole or in part.

If there is a conflict between the Policy/Certificate and this Rider, the terms of this Endorsement will govern. T210-AE-FL RESIDENTS ONLY

GEORGIA

The Policy/Certificate are hereby amended for Georgia Residents as follows:

The Concealment and Misrepresentation provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Concealment and Misrepresentation: The entire coverage will be cancelled, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Georgia Amendatory Endorsement will govern. T210-AE-GA

HAWAII

The Certificate is hereby amended for Hawaii Residents as follows:

The following is added to SECTION V GENERAL PROVISIONS as follows:

Representations: All statements made by the Insured are deemed representations and not warranties. No statement made by the Insured shall be used in any contest unless a copy of the instrument containing the statement is or has been furnished to the Insured or to the Insured's beneficiary, if any. A misrepresentation, unless it is made with actual intent to deceive or unless

it materially affects the acceptance of the risk assumed by the Company, shall not prevent a recovery under the Certificate.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE-HI

IDAHO

The Policy/Certificate are hereby amended for Idaho as follows:

1. The following is added at the bottom of SECTION V General Provisions: **Contact Information for the Idaho Department of Insurance:**
Idaho Department of Insurance
Consumer Affairs
700 W. State Street, 3rd Floor
PO Box 83720
Boise, ID 83720-0043

1-800-721-3272 or 208-334-4250 or www.DOI.Idaho.gov

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE-ID

ILLINOIS

The Policy/Certificate are hereby amended for Illinois as follows:

- A. Item b.(i) under "Other Covered Reasons" in both TRIP CANCELLATION and TRIP INTERRUPTION appearing in SECTION I COVERAGES is deleted and replaced as follows:
(i) the building structure itself is unstable and there is a risk of collapse;
- B. Item 1. in the Injury definition in both TRIP CANCELLATION AND INTERRUPTION DUE TO YOUR INABILITY TO DIVE and LOST DIVING DAYS appearing in SECTION I COVERAGES is deleted and replaced as follows:
1. is direct and independent of disease or bodily infirmity;
- C. Item B. in the Exclusions in TRIP CANCELLATION AND INTERRUPTION DUE TO YOUR INABILITY TO DIVE is deleted and replaced as follows:

B. The Company will not be liable for claims, under the Coverage Part B, directly arising from any hazardous pursuit or occupation or flying except while flying as a passenger in a fully-licensed multi-engine passenger-carrying aircraft.

- D. The last sentence in the definition of "Injury" or "Injuries" appearing in SECTION II DEFINITIONS is deleted and replaced as follows:
The Injury must be the direct cause of loss and must be independent of disease or bodily infirmity and must not be caused by, or result from, Sickness.
- E. The definition of "Complications of Pregnancy" appearing in SECTION II DEFINITIONS is deleted and replaced as follows:
"Complications of Pregnancy" means conditions (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, hyperemesis gravidarum, preeclampsia, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include nonelective cesarean section, ectopic pregnancy which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.
- Complications of Pregnancy does not include false labor, occasional spotting, Physician-prescribed rest during the period of pregnancy, morning sickness and similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct complication of pregnancy.
- F. Item 1) in the definition of "Pre-Existing Condition" appearing in SECTION II DEFINITIONS is deleted and replaced as follows:
1) received or received a recommendation for a test, examination, or medical treatment for a condition which manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment;
- G. Item 1) in the Pre-Existing Condition Exclusion appearing in SECTION IV General Exclusions is deleted and replaced as follows:

1) received or received a recommendation for a test, examination, or medical treatment for a condition which manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment;

H. The Time of Payment of Claims provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim within 30 days after receipt of acceptable proof of loss. Failure to pay within such period shall entitle the Insured to interest at the rate of 9% per annum from the 30th day after receipt of acceptable proof of loss to the date of late payment, provided that interest amounting to less than one dollar need not be paid. T210-AE IL

LOUISIANA

The Policy/Certificate are hereby amended for Louisiana as follows:

1. The Time of Payment of Claims provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim within 30 days after receipt of acceptable proof of loss.

2. The Legal Actions provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Legal Actions: No legal action for a claim can be brought against the Company until 45 days after the Company receives proof of loss. No legal action for a claim can be brought against the Company more than 3 years after the time required for giving proof of loss. This 3-year time period is extended from the date proof of loss is filed and the date the claim is denied in whole or in part.

3. The Concealment and Misrepresentation provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Concealment and Misrepresentation: The entire coverage will be void, if when applying for coverage, You the Insured made a fraudulent statement or misrepresentation with the intent to deceive. Fraud or misrepresentation with

the intent to deceive after coverage is in force is grounds for cancellation and grounds to deny coverage for benefits related to such fraud, concealment, or misrepresentation. Coverage for other benefits will continue until the cancellation is effective.

4. The Subrogation provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Subrogation: If the Company make any payment under this coverage and the person to or for whom payment is made has a right to recover damaged from another, the Company shall be subrogated to that right. However, the Company's right to recover is subordinate to Your the Insured's right to be fully compensated.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE LA

MARYLAND

The Policy/Certificate are hereby amended for Maryland as follows:

1. On the Cover Page, the last sentence in the third paragraph indicating "When so returned, the coverage under this Certificate is void from the beginning" is deleted and will not appear.

2. The Concealment and Misrepresentation provision appearing in SECTION V GENERAL PROVISIONS is deleted and replaced as follows:
Concealment and Misrepresentation: The entire coverage will be cancelled, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Maryland Amendatory Endorsement will govern. T210-AE MD

MAINE

The Certificate is hereby amended for Maine Residents as follows:

1. The references to \$1,000 within the Maximum Benefit Amount/Principal Sum ranges in the SCHEDULE OF

BENEFITS for Accidental Death and Dismemberment, 24-Hour (Other than Air Flight), 24-Hour (Other than Common Carrier), Air Flight Only and Common Carrier Only are deleted and replaced with \$2,000.

2. The bottom three Types of Losses in 24-HOUR ACCIDENTAL DEATH AND DISMEMBERMENT are deleted and replaced as follows:

Loss of thumb and index finger of the same hand
100% of Principal Sum
Loss of Speech
100% of Principal Sum
Loss of Hearing One Ear Both Ears One Ear 50% of Principal Sum
100% of Principal Sum

3. The definition of Actual Cash Value appearing in SECTION II DEFINITIONS is deleted and replaced as follows:

"Actual Cash Value" means the replacement cost of an insured item of property at the time of loss, less the value of Physical Depreciation as to the item damaged. As used in this definition, Physical Depreciation means a value as determined according to standard business practices.

4. The Concealment and Misrepresentation provision in SECTION V GENERAL PROVISIONS is deleted and replaced as follows:

Concealment and Misrepresentation: The entire coverage will be cancelled, if before, during or after a loss, any material fact or circumstance relating to this insurance has been fraudulent or materially misrepresented. Notice of cancellation of the entire coverage will be delivered to the Insured at the Insured's last known address, and cancellation shall become effective 10 days after receipt by the Insured.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE ME

MINNESOTA

The Certificate is hereby amended for Minnesota Residents as follows:

1. The third paragraph of the Face Page is deleted and replaced as follows:

Insurance is provided by a Group Policy situated in a state other than Minnesota. Certificates delivered to residents of Minnesota are subject to the terms of the Certificate and this Minnesota Amendatory Endorsement and not the Group Policy.

2. All references to "Confirmation of Benefits" are hereby deleted and will not apply.
3. The following is added to appear as General Exclusion 31. or will appear as the last numbered Exclusion in **SECTION IV GENERAL EXCLUSIONS**:
31. Air, water or other pollution, or threat of a pollutant release;
4. The Time of Payment of Claims and Concealment and Misrepresentation provisions in **SECTION V GENERAL PROVISIONS** are deleted and replaced as follows:
Time of Payment of Claims: We, or Our designated representative, will pay the claim within five business days after receipt of acceptable proof of loss.
Concealment and Misrepresentation: The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance was orally misrepresented or misrepresented in writing with intent to deceive and defraud, or the misrepresentation increases the risk of loss.
5. The following is added as the last sentence in the Subrogation provision in **SECTION V GENERAL PROVISIONS**:
The Company may not subrogate itself to the rights of an Insured to proceed against another person if that other person is an Insured by the Company for the same loss.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE MN

NEBRASKA

The Policy/Certificate are hereby amended for Nebraska as follows:

- A. Item 1. in the definition of Pre-Existing Condition appearing in **SECTION II DEFINITIONS** is deleted and replaced as follows:

1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute or exhibited a subjective indication of a disease or a change in condition as perceived by You which would have prompted a reasonable person to seek diagnosis, care or treatment;

B. In Exclusion 4. appearing in **SECTION IV GENERAL EXCLUSIONS**, the reference to "races" is changed to "organized races".

C. In Exclusion 7. appearing in **SECTION IV GENERAL EXCLUSIONS**, the reference to "any race" is changed to "any organized race".

D. Item 1. in the **PRE-EXISTING CONDITION EXCLUSION** provision appearing in **SECTION IV GENERAL EXCLUSIONS** is deleted and replaced as follows:

1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute or exhibited a subjective indication of a disease or a change in condition as perceived by You which would have prompted a reasonable person to seek diagnosis, care or treatment;

E. The Time of Payment of Claims provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim immediately (or within 30 days) after receipt of acceptable proof of loss.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE NE

NEVADA

The Policy is hereby amended for Nevada as follows:

1. **SECTION V TERMINATION OF MASTER POLICY** is deleted and replaced as follows:

If the Policy has been in effect for less than 70 days, the Policyholder or the Company may terminate the Master Policy by giving 31 days advance written notice to the other party. Termination is without prejudice to any claims that exist on

such date.

If the Policy has been in effect for 70 days or more, the Company may terminate the Master Policy before the expiration of the agreed term for any one of the following grounds:

- (a) failure to pay premium when due;
- (b) conviction of the Insured of a crime arising out of acts increasing the hazard insured against;
- (c) discovery of fraud or material misrepresentation in the obtaining of the Master Policy or in the presentation of a claim thereunder;
- (d) discovery of an act of omission or a violation of any condition of the Master Policy.

If there is a conflict between the Policy and this Endorsement, the terms of this Endorsement will govern.
T210-AE NV

OHIO

The Certificate is hereby amended for Ohio as follows:

A. The following statement is added to the Face Page of the Certificate:

WARNING: Any person who knowingly, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

B. The Who is Eligible For Coverage provision appearing **SECTION III INSURING PROVISIONS** is deleted and replaced as follows:

Who is Eligible For Coverage:

A citizen or resident of the United States of America who is booked for travel on Your Trip, completes the enrollment form and for whom the required premium payment is paid.

C. The Excess Insurance provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and will not appear.

D. **SECTION V GENERAL PROVISIONS** is amended to include the following provision at the end:

Required Ohio Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for which the required premium payment has been paid prior to that termination date will continue until the end of Your Trip.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE OH

OKLAHOMA

The Policy/Certificate are hereby amended for Oklahoma as follows:

1. The third paragraph on the **Face Page** is deleted and replaced as follows:
Insurance provided by this Certificate is subject to all the terms and conditions of the Group Policy, situated in a state other than Oklahoma. Certificates delivered to residents of Oklahoma are subject to the terms of this Certificate and not the Group Policy.
2. The following statement is added to the **Face Page** of the Certificate:
WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information, is guilty of a felony.
3. Exclusion 2. pertaining to war appearing in **SECTION IV General Exclusions** is deleted and replaced as follows:
2. war or any act of war (whether declared or undeclared) while serving in the military or an auxiliary unit attached to the military or working in an area of war whether voluntarily or as required by an employer.
4. The last sentence in the **Medically Fit to Travel Exclusion** provision appearing in **SECTION IV General Exclusions** is deleted and replaced as follows:
If Coverage for a Trip is purchased and it is later determined that You, Family Member booked to travel with You were not Medically Fit to Travel, as defined in this Certificate Plan, at the time of purchase of

Coverage for a Trip, the Coverage is cancelled and premium paid will be returned.

5. The **Payment of Claims** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:
If any benefit is payable to: (a) an Insured who is a minor or otherwise not able to give a valid release; or (b) the Insured's estate, We may pay up to \$1,000 to the Insured's beneficiary or any relative whom We find entitled to the payment. Any payment made in good faith shall fully discharge Us to any party to the extent of such payment.
6. The **Concealment and Misrepresentation** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:
Concealment and Misrepresentation: The entire coverage will be cancelled, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.
7. **SECTION V General Provisions** is amended to include the following provisions:
Conformity with Oklahoma statutes: The provisions of this Certificate conform to the requirements of Oklahoma law and this Certificate controls over any conflicting statutes of any state in which You reside on or after the effective date of this Certificate.
Required Oklahoma Statement regarding premium: The exact amount of premium will be determined upon purchase of the coverage under this Certificate, and the basis and rates upon which the premium will be the determined are the plan design, Trip cost and age of the Insured. The average per Trip premium is \$39.49 USD.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Oklahoma Endorsement will govern. T210-AE OK

RHODE ISLAND

The Certificate is hereby amended for Rhode Island as follows:

1. The definition of **Family Member** in **SECTION II DEFINITIONS** is deleted and replaced as follows:
"Family Member" means any of the following: Your legal

spouse (or common-law spouse where legal), legal guardian or ward, son or daughter (adopted, foster, step or in-law), brother or sister (includes step or in-law), parent (includes step or in-law), grandparent (includes in-law), grandchild, aunt, uncle, niece or nephew, a person who is a party to a civil union with You as Your dependent and spouse.

2. The **Time of Payment of Claims** provision in **SECTION V GENERAL PROVISIONS** are deleted and replaced as follows:
Time of Payment of Claims: We, or Our designated representative, will pay the claim within 60 days after receipt of acceptable proof of loss.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE RI

SOUTH CAROLINA

The Certificate is hereby amended for South Carolina as follows:

1. The **Payment of Claims, Physical Examination and Autopsy and Legal Actions** provisions in **SECTION V GENERAL PROVISIONS** are deleted and replaced as follows:
Payment of Claims: Benefits will be paid to the Insured. Loss of Life benefits are payable in accordance with the beneficiary designation in effect at the time of payment. If none is then in effect, the benefits will be paid to the Insured's estate. Any other benefits unpaid at death may be paid, at the Company's option, either to the Insured's beneficiary or estate.
Physical Examination and Autopsy: The Company at its own expense may have the Insured examined as often as reasonably necessary while a claim is pending and in cases of death of the Insured the Company at its own expense also may have an autopsy performed during the period of contestability unless prohibited by law. The autopsy must be performed in South Carolina.
Legal Actions: No legal action may be brought to recover on this Certificate within sixty days after written proof of loss has been given as required by this Certificate. No such action may be brought after six years from the time written proof of loss is required to be given.

2. The following provision is added as the last provision in **SECTION V GENERAL PROVISIONS**:

Change of Beneficiary: The Insured can change the beneficiary at any time by giving the Company written notice. The beneficiary's consent is not required for this or any other change in the Certificate, unless the designation of the beneficiary is irrevocable.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE SC

SOUTH DAKOTA

The Policy/Certificate are hereby amended for South Dakota as follows:

1. The following Exclusion 4. appearing in **SECTION IV GENERAL EXCLUSIONS** is deleted in its entirety:

4. being intoxicated as defined herein, or under the influence of any controlled substance unless administered or prescribed by a Legally Qualified Physician";

2. Exclusion 10. appearing in **SECTION IV GENERAL EXCLUSIONS** is deleted and replaced as follows:

10. any amount paid under any Worker's Compensation, Disability Benefit or similar law;

3. The last sentence of the **Legal Actions** provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

No legal action for a claim may be brought against Us after 6 years from the time written Proof of Loss is required to be furnished.

If there is a conflict between the Policy/Certificate and this Rider, the terms of this Endorsement will govern. T210-AE SD

UTAH

The Policy/Certificate are hereby amended for Utah as follows:

1. The third paragraph of the **Exposure and Disappearance** provision in **[[24-HOUR] [24-HOUR OTHER THAN AIR FLIGHT] [24-HOUR OTHER THAN COMMON CARRIER] ACCIDENTAL DEATH AND DISMEMBERMENT]** and **[AIR**

FLIGHT ONLY][ACCIDENTAL DEATH AND DISMEMBERMENT] and the second paragraph of the **Exposure and Disappearance** provision in **[[COMMON CARRIER] ACCIDENTAL DEATH AND DISMEMBERMENT]** appearing in **SECTION I COVERAGES** is deleted and replaced as follows:

If, while insured under this Coverage, You are in an Accident resulting in the disappearance, sinking or damaging of an air or water conveyance on which You are covered by this Coverage, it will be presumed, unless there is evidence to the contrary, that You suffered loss of life as a result of those Injuries.]

2. The definition of **Family Member** appearing in **SECTION [III] DEFINITIONS** is amended to include a child placed for adoption with the Insured.

3. The definition of **Complications of Pregnancy** appearing **SECTION [II] DEFINITIONS** is deleted and replaced as follows:

["Complications of Pregnancy" means diseases or conditions the diagnoses of which are distinct from pregnancy but are adversely affected or caused by pregnancy and not associated with a normal pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, ectopic pregnancy which is terminated, a spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible, puerperal infection, eclampsia, pre-eclampsia and toxemia.

Complications of Pregnancy does not include false labor, occasional spotting, Physician-prescribed rest during the period of pregnancy, morning sickness and similar conditions associated with the management of a difficult pregnancy.]

4. The **Proof of Loss** provision appearing in **SECTION [V] GENERAL PROVISIONS** is amended to include the following sentence at the end of the provision:
Failure to give notice or file proof of loss does not bar recovery under the Certificate if the Company fails to show that it was prejudiced by the failure to provide proof in a timely manner.

5. The **Time of Payment of Claims** provision appearing in **SECTION [V] GENERAL PROVISIONS** is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim within 30 days after receipt of acceptable proof of loss.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE UT

The Policy/Certificate are hereby amended for Utah as follows:

1. The definition of **Hospital** appearing in **SECTION [III] DEFINITIONS** is deleted and replaced as follows:
["Hospital" means (a facility that is licensed and operating within the scope of such license. This definition may not preclude the requirement of medical necessity of hospital confinement or other treatment.]

2. The **Excess Insurance** provision appearing in **SECTION [V] GENERAL PROVISIONS** is deleted.

3. The **SECTION [VI] COORDINATION OF BENEFITS** is deleted.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE UT3

VERMONT AMENDATORY ENDORSEMENT

The Policy/Certificate are hereby amended for Vermont as follows:

A. The references to "Usual and Customary" are replaced by **"Reasonable and Necessary"**.

B. The definition of **"Usual and Customary"** appearing in **SECTION II DEFINITIONS** will now appear as the definition of **"Reasonable and Necessary"**.

C. The following exclusions appearing in **SECTION IV GENERAL EXCLUSIONS** are deleted and/or deleted and replaced as follows:

4. riding or driving in races, or speed or endurance competitions or events, when racing in a professional capacity;
5. deleted in its entirety (relating to mountaineering);

7. participating in [bodily contact sports] [parachuting [except parasailing]] [extreme skiing, skiing outside marked trails or hell-skiing] [any race in a professional capacity] [speed contests [not including any of the regatta races]] [spelunking or caving];

25. deleted in its entirety (relating to device, weapon, material employing chemical, biological, radiological).

D. The Time of Payment of Claims provision appearing in SECTION V GENERAL PROVISIONS is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, after settlement has been agreed upon, will pay the claim in the agreed amount within 10 working days.

E. The last sentence in the Physician Examination and Autopsy provision appearing in SECTION V GENERAL PROVISIONS is deleted and replaced as follows:

The Company may have an autopsy done (at the expense of the Company) unless the law or Your religion forbids it.

F. The following is added as the last sentence in the Legal Actions provision appearing in SECTION V GENERAL PROVISIONS:

However, Your right to bring legal action against Us is not conditioned upon Your compliance with the provisions of any appraisal condition.

G. SECTION V GENERAL PROVISIONS is amended to include the following provision at the end of that section: Vermont law regarding civil unions: Vermont law requires that insurance policies and certificates offered to married persons and their families be made available to parties to a civil union and their families. In order to receive benefits in accordance with Vermont law regarding civil unions, the civil union must be established in the state of Vermont according to Vermont law. It is understood that definitions and provisions within this Certificate designating Insured, Eligible Person, Family Member, You/and or Your and another other certificate definitions and provisions designating an Insured under this Certificate are amended, whenever appearing, where terms denoting a marital relationship or family relationship arising out of a marriage are used to indicate parties to a civil union and their families under Vermont law.

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If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE VT

WYOMING

The Certificate is hereby amended for Wyoming as follows:

1. In the definition of Pre-Existing Condition appearing in SECTION II DEFINITIONS, Item 1) is deleted and replaced as follows:
1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute, resulting in actual diagnosis, care or treatment received;
2. In the Pre-Existing Condition Exclusion provision appearing in SECTION IV GENERAL EXCLUSIONS, Item 1) is deleted and replaced as follows:
1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute, resulting in actual diagnosis, care or treatment received;

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE WY

Signed for United States Fire Insurance Company By:



Marc J. Adee
Chairman and CEO

James Kraus
Secretary

When used throughout this document "The Company", "Our", "We", or "Us" means:

United States Fire Insurance Company

GRIEVANCE PROCEDURES

When you submit a claim and that claim is denied, we will provide a written statement containing the reasons for the Adverse Determination. You have the right to request a review of any Company decision or action pertaining to our contractual relationship and to appeal any adverse claim determination we've made by filing a Grievance. These procedures have been developed to ensure a full investigation of a Grievance through a formal process.

DEFINITIONS

A "Grievance" is a written complaint requesting a change to a previous claim decision, claims payment, the handling or reimbursement of health care services, or other matters pertaining to your coverage and our contractual relationship.

An "Adverse Determination" is a determination by the Company or its designated utilization review organization that (i) a service, treatment, drug, or device, is experimental, investigational, specifically limited or excluded by your coverage; or (ii) a facility admission, the availability of care, continued stay or other health care services proposed or furnished have been reviewed and, based upon the information provided, does not meet the contractual requirements for medical necessity, appropriateness, health care setting, level of care or effectiveness and therefore, the benefit coverage is denied, reduced or terminated in whole or in part.

INFORMAL GRIEVANCE PROCEDURE

You, your authorized representative, or a provider acting on your behalf may submit an oral complaint to us within 60- days after an event that causes a dispute. Telephoning allows you to discuss your complaint or concerns and gives us the opportunity to immediately resolve the problem.

If we don't have all the information necessary to review

your complaint, we will request any additional information within 5 business days of receiving your complaint. After we receive all the necessary information, we will provide you, your authorized representative, or a provider acting on your behalf with our written decision within 30-days after receiving the complaint and all necessary information. If the problem cannot be resolved in this manner, you still have the right to submit a written request for the complaint to be reviewed through the Formal Grievance Procedure, as outlined below.

FORMAL GRIEVANCE PROCEDURE

A formal Grievance may be submitted by you, your authorized representative, or in the event of an Adverse Determination, by a provider acting on your behalf.

If you file a formal Grievance, you will have the opportunity to submit written comments, documents, records and other information you feel are relevant to the Grievance, regardless of whether those materials were considered in the initial Adverse Determination.

First Level Review

Within 3 working business days after receiving the Grievance, we must acknowledge the Grievance and provide you, your authorized representative or a provider with the name, address, and telephone number of the coordinator handling the Grievance and information on how to submit written material. The person(s) who reviews the Grievance will not be the same person(s) who made the initial Adverse Determination. During the review, all information, documents, and other materials submitted relating to the claim will be considered, regardless of whether they were considered in making the previous claim decision. The Insured will not be allowed to attend, or have a representative attend, a First Level Review. The Insured may, however, submit written material for consideration by the reviewer(s).

GRIEVANCE

When the Grievance is based in whole or in part on a medical judgment, the review will be conducted by, or in consultation with, a medical doctor with appropriate

training and expertise to evaluate the matter.

Following our review of your Grievance, we must issue a written decision to you and, if applicable, to your representative or provider, within 20-days after receiving the Grievance. The written decision must include:

- (1) The name(s), title(s) and professional qualifications of any person(s) participating in the First Level Review process.
- (2) A statement of the reviewer's understanding of the Grievance.
- (3) The specific reason(s) for the reviewer's decision in clear terms and the contractual basis or medical rationale used as the basis for the decision in sufficient detail for the Insured to respond further to our position.
- (4) A reference to the evidence or documentation used as the basis for the decision.
- (5) If the claim denial is based on medical necessity, experimental treatment or similar exclusion, instructions for requesting an explanation of the scientific or clinical rationale used to make the determination.
- (6) A statement advising you of your right to request a Second Level Review, if applicable, and a description of the procedure and timeframes for requesting a Second Level Review.

Second Level Review

The Second Level Review process is available if you are not satisfied with the outcome of the First level Review for an Adverse Determination. Within ten business days after receiving a request for a Second Level Review, we will advise you of the following:

- (1) the name, address, and telephone number of a person designated to coordinate the Grievance review for the Company;
- (2) a statement of your rights, including the right to:
 - ❖ attend the Second Level Review
 - ❖ present his/her case to the review panel;
 - ❖ submit supporting materials before and at the review meeting;
 - ❖ ask questions of any member of the review panel;
 - ❖ be assisted or represented by a person of

his/her choice, including a provider, family member, employer representative, or attorney.

- ❖ request and receive from us free of charge, copies of all relevant documents, records and other information that is not confidential or privileged that were considered in making the Adverse Determination.

We must convene a review panel and hold a review meeting within 45-days after receiving a request for a Second Level Review. We will notify you in writing of the meeting date at least 15-days prior to the date. The review meeting will be held during regular business hours at a location reasonable accessible to you. In cases where a face-to-face meeting is not practical for geographic reasons, we will offer you the opportunity to communicate with the review panel at our expense by conference call or other appropriate technology. Your right to a full review may not be conditioned on whether or not you appear at the meeting.

If you choose to be represented by an attorney, we may also be represented by an attorney. If we choose to have an attorney present to represent our interests, we will notify you at least 15 working days in advance of the review that an attorney will be present and that you may wish to obtain legal representation of your own.

The panel must be comprised of persons who:

- (1) were not previously involved in any matter giving rise to the Second Level Review;
- (2) are not employees of the Company or Utilization Review Organization; and
- (3) do not have a financial interest in the outcome of the review.

A person previously involved in the Grievance may appear before the panel to present information or answer questions.

All persons reviewing a Second Level Grievance involving a Utilization Review non-certification or a clinical issue will be providers who have appropriate expertise, including at least one clinical peer. If we use a clinical peer on an appeal of a Utilization Review non-certification or on a First Level Review, we may use one of our employees on the Second Level Review panel if the panel is comprised

of 3 or more persons.

GRIEVANCE

We must issue a written decision to you and, if applicable, to your representative or provider, within 10 business days after completing the review meeting. The decision must include:

- (1) the name(s), title(s) and qualifying credentials of the members of the review panel;
- (2) a statement of the review panel's understanding of the nature of the Grievance and all pertinent facts;
- (3) the review panel's recommendation to the Company and the rationale behind the recommendation;
- (4) a description of, or reference to, the evidence or documentation considered by the review panel in making the recommendation;
- (5) in the review of a Utilization Review non-certification or other clinical matter, a written statement of the clinical rationale, including the clinical review criteria, that was used by the review panel to make the determination;
- (6) the rationale for the Company's decision if it differs from the review panel's recommendation;
- (7) a statement that the decision is the Company's final determination in the matter;
- (8) notice of the availability of the Commissioner's office for assistance, including the telephone number and address of the Commissioner's office.

EXPEDITED REVIEW

You are eligible for an expedited review when the timeframes for an Informal, formal First Level review or Second Level review would reasonably appear to seriously jeopardize your life or health, or your ability to regain maximum function. An expedited review is also available for all Grievances concerning an admission, availability of care, continued stay or health care service for a person who has received emergency services, but who has not been discharged from a facility.

A request for an expedited review may be submitted orally or in writing. An expedited review must be evaluated by an

appropriate clinical peer in the same or similar specialty as would typically manage the case being reviewed. If we don't have the information necessary to decide an appeal, we will send you notification of precisely what is required within 24- hours of our receipt of your Grievance. All necessary information, including our decision, will be transmitted by telephone, facsimile, or the most expeditious method available. Provided we have enough information to make a decision, you, your authorized representative, or a provider acting on your behalf will be notified of the determination as

expeditiously as the medical condition requires, but in no event more than 72-hours after the review has commenced. Written confirmation of our decision will be provided within 2 working business days of the decision and will contain the same items described in the written decision requirements for First Level reviews.

If the expedited review does not resolve the situation, you, your representative or a provider acting on your behalf may submit a written Grievance.

We will not provide an expedited review for retrospective reviews of Adverse Determinations

When used throughout this document "The Company", "Our", "We", or "Us" means: **United States Fire Insurance Company**

PRIVACY POLICY AND PRACTICES

The Company values your business and your trust. In order to administer insurance policies and provide you with effective customer service, we must collect certain information about our customers. We want you to know that we are committed to protecting your private information and we will comply with all federal and state privacy laws. Below is a Privacy Notice describing our policy regarding the collection and disclosure of personal information. Please review this Notice and keep a copy of it with your records.

Your Privacy is Our Concern

When you apply to The Company for insurance or make a claim against a policy written by The Company, you disclose information about yourself to us. There are legal requirements governing the collection, use, and disclosure of such information. The Company maintains physical, electronic, and procedural safeguards that comply with state and federal regulations to guard your personal information. We also limit employee access to personally identifiable information to those with a business reason for knowing such information. The Company instructs our employees as to the importance of the confidentiality of personal information, and takes measures to enforce employee privacy responsibilities.

What kind of information do we collect about you and from whom?

We obtain most of our information from you. The application or claim form you complete, as well as any additional information you provide, generally gives us most of the information we need to know. Sometimes we may contact you by phone or mail to obtain additional information. We may use information about you from other transactions with us, our affiliates, or others. Depending on the nature of your insurance transaction, we may need additional information about you or other individuals proposed for coverage. We may obtain the additional information we need from third parties, such as other insurance companies or agents, government agencies, medical personnel, the state motor vehicle department, information clearinghouses, credit reporting agencies, courts, or public records. A report from a

consumer reporting agency may contain information as to creditworthiness, credit standing, credit capacity, character, general reputation, hobbies, occupation, personal characteristics, or mode of living.

What do we do with the information collected about you?

If coverage is declined or the charge for coverage is increased because of information contained in a consumer report we obtained, we will inform you, as required by state law or the federal Fair Credit Reporting Act. We will also give you the name and address of the consumer reporting agency making the report. We may retain information about our former customers and may disclose that information to affiliates and non-affiliates only as described in this notice.

To whom do we disclose information about you?

We may disclose all the information that we collect about you, as described above. We may disclose such information about you to our affiliated companies, such as:

- Insurance companies;
- Insurance agencies;
- Third party administrators;
- Medical bill review companies; and
- Reinsurance companies.

We may also disclose nonpublic personal information about you to affiliated and nonaffiliated third parties as permitted by law. You have a right to access and correct the personal information we collect, maintain and disclose about you.

How to contact Us

You may obtain a more detailed description of the information practices prescribed by law by contacting us at the address below. Remember to include your name, address, policy number, and daytime phone number:

Privacy Policy Coordinator
Fairmont Specialty
5 Christopher Way, 3rd Floor
Eatontown, New Jersey 07724

Out of State Travel Application

Please fill out this form, which will go to the School Committee for approval, to the best of your ability. Remember to send the questionnaire to your travel representative before filling out this form, so that you can simply cut and paste their answers into this document.

Your email address (mkitchen@arlington.k12.ma.us) was recorded when you submitted this form.

What is the name of the lead teacher? *

Madalyn Kitchen, Tino D'Agostino

In what department and at which school does the lead teacher work? *

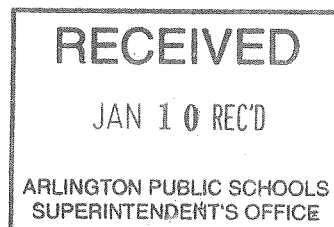
Performing Arts

Trip Basics

Please provide some basic information about this trip.

Destination (City(s)/Country): *

New York City



We will be performing at two different venues while there, one of which will be a local high school. For the students to prepare repertoire to perform while traveling like this is an important and valuable skill and experience, that many have never had before.

Will any school be missed by those attending? (Yes or No) *

Yes

If school will be missed, what steps will be taken to minimize the impact?

The students know they will be responsible for any missed work, there is time while traveling when they can do homework. We are also choosing to travel after the weeks of AP tests to hopefully make the impact less.

**Who can attend this trip? Is it geared toward particular students? Grade levels? etc.
(Requirements for participation should be clearly stated on the Trip Policy & Behavior Contract to be signed by parents. Edits to this document can be made on your own copy) ***

A member of the performing ensembles - choirs, band or orchestra.

How much does the trip cost (an estimate is fine) per student? *

700

Travel Company

If applicable, what is the name of the agency you are working with in planning this trip?

Travel Design Italy

What is the name, phone number and/or email address of the individual agent(s) with whom you have worked?

Giuseppe Tarzia, 011 39 347 6683611, g.tarzia@yahoo.com

Describe the trip insurance plan. (Trip insurance usually includes coverage for emergency travel home, trip cancellation, etc. This is NOT just liability.)

travel protection and trip cancellation (not included in 700)

In the event of cancellation, describe the refund date(s) and policy. (Include a print out of this information attached the Trip Policy & Behavior Contract that is signed by students and parents/guardians) *

to be provided by Giuseppe Tarzia (I don't have details yet)

Pre-Trip Prep

Describe how you will disseminate information about this trip to students. *

Student and Parents Email and class announcements

Describe how you will communicate with parents before the trip. (Parent meetings, informational website, etc) *

We will have an informational meeting and continue through emails.

During the Trip

Please attach your trip itinerary. (Be sure the document includes the lead teacher name, the phrase "Itinerary" and destination city in its title) *

Files submitted:

Arlington NYC - Madalyn Kitchen.pdf

Describe how you will factor emergency expenses into the trip budget. *



Oct . 22 , 2018

Treasures of NYC Arlington High School

custom tour - 4 days - 3 Nights 17-20 May 2018

Daily Itinerary & Suggested Activities

Dear Sirs,

Below please find itinerary and confidential quotation for May 2019 group, please note that nothing has been reserved at the moment. As soon as you approve program and finalize all details we can proceed with final bookings and confirmation.

Day 1 Fri May 17 : BOSTON/ New York City

Morning departure by Motorcoach from Arlington High School. In the afternoon Arrive in New York City/ NJ area. This afternoon visit the New Jersey school district including visit at a local school around Clifton/ Lynhurst area followed by performance buffet dinner hosted by School. Check in at your hotel.

Day 2 Sat May 18:

Take a walking tour of Midtown including:

9/11 Memorial and Museum

Fifth Avenue

Rockefeller Center

Bryant Park

Make a photo stop in Central Park. Tonight your dinner is at at a local restaurant. Overnight at hotel in NJ.
(D)

Day 3 Sun May 19: In the morning visit the Statue of Liberty and Ellis Island

Marvel at the 151-foot model engineered by Alexandre Gustav Eiffel, of Eiffel Tower fame

Explore the Ellis Island Immigration Museum. This afternoon prepare for concert at local cultural club or Church, tonight Enjoy dinner at a local restaurant. (B,D)

Day 4 Mon May 20 : New York City/Arlington

Morning guided tour of New York

Greenwich Village

SoHo

Chinatown

Little Italy

Visit and free time on Times Square for lunch before departure for Arlington return trip home

Estimate arrival 8-9 pm

ITALY: Via Paolo Paruta n.3 Piano S1 interno 1 00179 Rome Italy Tel: + 39 3476683611

USA administration office & payments: TDI inc 221 Broadway Providence RI 02903 USA

Web: info@traveldesignitaly.com - www.traveldesignitaly.com

Sede legale: T.D.I. di Tarzia Romina & C sas Via Latticugna 70B 89048 Siderno RC P.Iva:02382640809



LAND DEPOSIT: Please note that hotels have not been requested or confirmed for your group at this time. In order to proceed with land operations, we require a \$ 200.00 per person deposit (make checks payable to TRAVEL DESIGN ITALY).

Hotels confirmed will be as indicated or similar, depending on space availability at the time of booking. All rooms are based on "run of the house" category and supplements may apply to guarantee specific room preferences. On occasion, hotels may require additional deposits in order to block group space. We will advise you of these requirements if they are requested.

TRAVEL DESIGN ITALY strongly suggests the travel protection and trip cancellation insurance.

I hope this proposal is acceptable to you and your group. Should you have any questions, please do not hesitate to call me. My direct extension is 011 39 347 6683611 and my e-mail address is g.tarzia@yahoo.com or info@traveldesignitaly.com

I look forward to the opportunity of working with you on this, and futures programs to Europe, and hope to hear from you soon.

Sincerely,

Giuseppe Tarzia

Private & Customized Groups

PROPOSAL ACCEPTANCE

On your acceptance of this proposal, we request that a signed copy be returned to us, thus acknowledging your agreement to the program outlined above, and the conditions as attached.

Name

Title

Date:

CANCELLATION POLICY: (Air non refundable) Land Packages:

Prior to Departure:	Cancellation Charge
60-31 days	50% of package price
20-15 days	75% of package price
14-0 days	100% of package price

Travel Design Italy
Insurance of Travel

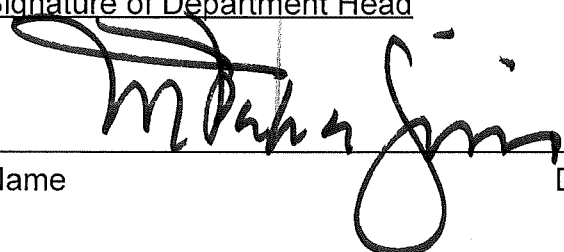
Benefits Per Person (US Dollars)	Maximum Amount of Coverage
Trip Cancellation	Trip Cost
Trip Interruption (\$500 Return Air only if \$0 Trip Cost)	150% Trip Cost
Missed Connection	\$500
Travel Delay	\$750
Baggage Loss	\$1,500
Baggage Delay	\$300
Emergency Accident/Sickness Medical Expense	\$25,000
Evacuation / Repatriation	\$100,000
Worldwde EmergencyAssistance Services	Included

REQUIRED DOCUMENTS: Please make a copy of, personalize the copy (if necessary) & print a copy of each for the International Travel Coordinator.

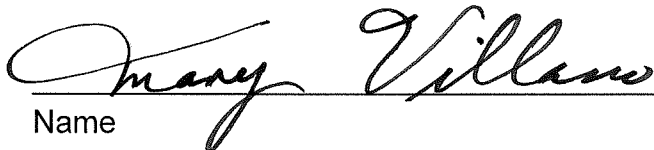
- AHS - Out of State Travel Application (printed by Travel Coordinator)
- Out of State Trip Application - Signature Form
- Legal Documents - Medical Info, Permission to Treat & Release from liability
- Trip Selection Criteria & Behavior Contract

Before submitting the completed application (with all necessary paperwork) to the School Committee, please get approval from your department head then schedule a meeting with the International Coordinator (Mary Villano).

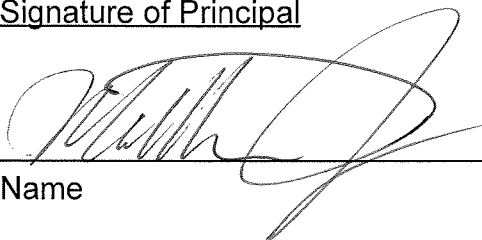
Signature of Department Head

 1/5/19
Name Department Date

Signature of International Travel Coordinator

 1/9/19
Name Date

Signature of Principal

 AHS 1/9/19
Name School Date

Signature of Superintendent

Name Date



Town of Arlington, Massachusetts

8:20 PM Subcommittee/Liaison Reports/Announcements

Summary:

Budget: Len Kardon, Chair

Community Relations: Jennifer Susse, Chair

Curriculum, Instruction, Assessment & Accountability: Jeff Thielman, Chair

Facilities: Bill Hayner, Chair

Policies & Procedures: Paul Schlichtman, Chair

Legal Services Review: Bill Hayner, Len Kardon

Arlington High School Building Committee: Jeff Thielman, Kirsii Allison-Ampe

Gibbs Committee: Jane Morgan

Liaisons Reports

Announcements

Future Agenda Items

-



Town of Arlington, Massachusetts

Executive Session

Summary:

To conduct strategy sessions in preparation for negotiations with union and/or nonunion personnel or contract negotiations with union and /or nonunion in which if held in an open meeting, may have a detrimental effect.

To conduct strategy with respect to collective bargaining or litigation, in which if held in an open meeting, may have a detrimental effect. Collective bargaining may also be conducted.



Town of Arlington, Massachusetts

8:45 PM Adjournment



Town of Arlington, Massachusetts

Submitted by Kirsi Allison-Ampe, MD, Chair



Town of Arlington, Massachusetts

Correspondence Received:

Summary:

Warrant dated 1 10 2019

Approval of NYC trip

Approval of Japan Trip

Program of Studies 2019-2020

Public Policy Start Time

Suspension and School Discipline Update