

Atlantic County  
Municipal Joint  
Insurance

Fund

South Jersey Communities Securing Their Future



## **AGENDA PACKET**



**Wednesday, April 17, 2024 at 3:00 PM**

**Atlantic County Library, 40 Farragut Ave,  
Mays Landing**

***WWW.ACMJIF.ORG***

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

**April 17, 2024 – 3:00 PM**

**Atlantic County Library, Mays Landing**

**AGENDA**

- I. Meeting called to order by Chairman
- II. Flag Salute
- III. Statement of Compliance with Open Public Meetings Act
  - A. Notice of this meeting was given by:
    - 1. Sending sufficient notice herewith to:
      - a. *The Press of Atlantic City*
      - b. *Courier Post*, Cherry Hill, New Jersey; and
    - 2. Filing advance written notice of this meeting with the Clerks/Administrators of all member municipalities; and
    - 3. Posting notice on the public bulletin boards of all member municipalities.
- IV. **Roll Call**
  - A. Fund Commissioners
  - B. Fund Professionals
  - C. Risk Management Consultants
- V. Move up Alternates (if necessary)
- VI. Approval of Minutes ..... Pages 1-14
  - A. Adoption of the **March 20, 2024** minutes – **Motion – All in Favor**
- VII. Closed Session Minutes
  - A. Approval of the **March 20, 2024** Closed Session minutes – **Motion – All in Favor**  
The Closed Session Minutes shall not be released to the public until the reason(s) for their remaining closed is no longer applicable and the Fund Solicitor has an opportunity to review them.
- VIII. Closed Session – Resolution 2024- \_\_\_\_\_ Authorizing a Closed Session of the Atlantic County Municipal Joint Insurance Fund to discuss matters affecting the protection of safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations – **Motion -Roll Call**
  - A. Claims Review Committee Report – Closed Session Items
  - B. Professionals’ Reports
    - 1. Claims Administrator’s Report
    - 2. Executive Director’s Report
    - 3. Safety Director’s Report
    - 4. Solicitor’s Report
- IX. Reopen Public Portion of Meeting – **Motion – All in Favor**
- X. Authorization of Claims Payments – **Motion - Roll Call**
- XI. Authorization to Abandon Subrogation (if necessary) – **Motion - Roll Call**
- XII. Claims Review Committee Report: – Open Session Items – April 11, 2024.....Handout
- XIII. Claims Administrator’s Report
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XX.	Safety Director’s Report	
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- XXII. Treasurer’s Report as of March 31, 2024.....Pages 123-218
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  - B. Investment Report
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  - D. Payment Register – **Motion to Approve - Roll Call**
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- XXIII. MEL/RCF/EJIF/Cyber Reports
  - A. MEL Report – March 22, 2024.....Pages 219-220
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- XXIV. Miscellaneous Business
  - A. Resolution 2024 - \_\_\_\_\_ Authorizing the Release of Fund Year 2022 Closed Session Executive Committee Meeting Minutes as Recommended by the Fund Solicitor –**Motion – Roll Call**.....Pages 224-226
  - B. Resolution 2024 - \_\_\_\_\_ Authorizing the Release of Fund Year 2023 Closed Session Executive Committee Meeting Minutes as Recommended by the Fund Solicitor –**Motion – Roll Call**.....Pages 227-228
  - C. Motion to Authorize the Fund Solicitor & Executive Director to Prepare, Advertise, and Receive Requests for Qualifications for the Position of Workers Compensation Defense Attorneys and Liability Defense Attorneys – **Motion – All in Favor**
  - D. Resolution 2024- \_\_\_\_\_ Appointing James Pacanowski, Ventnor City, as the Funds Representative to the MEL/RCF/EJIF for the remainder of 2024 – **Motion – Roll Call**.....Page 229

**The Next Meeting of the ACMJIF will be held on **Wednesday, May 15, 2024**  
at **3:00 pm** via **Microsoft Teams****

- XXV. Public Comment
  - A. Motion to Open Meeting to Public Comment – **Motion - All in Favor**
  - B. Motion to Close Meeting to Public Comment – **Motion – All in Favor**
  
- XXVI. Motion to Adjourn Meeting – **All in Favor**



**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

Via Teams Conferencing

March 20, 2024 at 3:00 PM

***OPEN SESSION MINUTES***

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The regular meeting of the Atlantic County Municipal Joint Insurance Fund (ACM JIF) was held on March 20, 2024 at 3:00 PM, prevailing time, via Teams Conferencing, Chair Liz Woods, Ocean City, presiding. The meeting was called to order at 3:00 PM.

***FLAG SALUTE***

***STATEMENT OF COMPLIANCE WITH OPEN PUBLIC MEETING ACT***

Notice of this meeting was given by: (1) sending sufficient notice herewith to *The Press of Atlantic City* and the *Courier Post*, Cherry Hill, New Jersey; (2) filing advance written notice of this meeting with the Clerks/Administrators of all member municipalities of the Atlantic County Municipal Joint Insurance Fund; and (3) posting notice on the public bulletin boards of all member municipalities of the Atlantic County Municipal Joint Insurance Fund.

***ROLL CALL of 2024 FUND COMMISSIONERS***

Those in attendance were:

Kayla Lovallo, **Absecon City**  
Bill Nimohay **Buena Borough**  
Paul Dietrich, **Cape May City**  
Ed Grant, **Cape May Point**  
Heather Miller, **Commercial Twp.**  
Dawn Marie Bascelli, **Deerfield Twp.**  
Jessica Bishop, *Secretary*, **Dennis Twp.**  
Lisa Marcolongo, **Estell Manor City**  
Patricia Gatto, **Folsom Borough**  
Alim Parks, Sr., **Galloway Twp.**  
Anthony Strazzeri, Alt., **Linwood City**  
Pam Tomassi, **Longport Borough**  
Karen Fournier, **Lower Township**  
Varvara Keun, **Middle Twp.**  
Joe Calchi, **Millville City**  
Dawn Stollenwerk, **Mullica Twp.**  
Jennifer VanSant, **North Wildwood City**  
Mary Canesi, **Northfield City**  
Liz Woods, *Fund Chair*, **Ocean City**  
Shurlana Stewart, Alt., **Pleasantville City**  
Kellie Seib, **Sea Isle City**  
Lucy Samuelson, **Somers Point City**  
Kate McGonagle, Alt., **Stone Harbor Borough**  
Rosemary Trout, Alt., **Upper Twp.**  
Roy Spoltore, **Upper Deerfield Twp.**  
Jim Pacanowski, **Ventnor City**

Michael Dougherty, **Waterford Twp.**  
George Dick, **West Cape May Borough**  
Joe Segrest, **West Wildwood City**  
Teresa Seelman, Alt., **Weymouth Twp.**  
Dan Dunn, **Wildwood City**  
Connie Mahon, **Wildwood Crest**  
Laurie Boyd, **Woodbine Borough**

Absent Fund Commissioners:

Scott Wahl, **Avalon Borough**  
Mollye O'Neill, **Brigantine City**  
Bob Campbell, **Downe Twp.**  
Shantele Pollock, **Hamilton Twp.**  
Dan Adams, **Margate City**  
Jared Marandino, **Newfield Borough**

Present Fund Professionals:

Paul A. Forlenza, MGA, Executive Director, *RPA a Division of Gallagher*  
Kamini Patel, MBA, CIC, CPCU, AIDA ®, Program Director, *RPA a Division of Gallagher*  
Tracy Forlenza, Recording Secretary  
Christopher Roselli, Account Manager, *Qual-Lynx*  
Karen Beatty, Client Services Manager, *Qual-Lynx*  
Chief Hummel, Safety Director, *J.A. Montgomery Consulting*  
Robert Garish, Assistant Director of Public Sector, *J.A. Montgomery Consulting*  
David DeWeese, Esquire, Fund Attorney, *The DeWeese Law Firm, P.C.*  
Christopher J. Winter, Sr., CPM, Law Enforcement Risk Management Consultant  
Jerry Caruso, Technology Risk Services Director, *Wintsec Consulting*  
John Hansen, Fund Treasurer

Absent Fund Professionals were:

None

Present Risk Management Consultants were:

C. J. Adams Company  
Atlantic Associates  
J. Byrne Agency, Inc.  
Conner Strong & Buckelew  
Glenn Insurance  
Hardenbergh Insurance  
Insurance Agencies Inc.  
Marsh & McLennan Agency  
McMahon Agency, Inc.  
William R. Mints Agency  
Siracusa-Kauffman Insurance

Absent Risk Management Consultants were:

BCA Insurance  
Barclay Insurance Group  
Thomas Heist Insurance Agency

*These minutes do not necessarily reflect the order in which some items were discussed.*

**MOVE UP ALTERNATES**

Chair Woods entertained a motion to move Karen Fournier, Lower Township, to the Executive Committee in absence of Scott Wahl, Avalon, for voting purposes.

Motion by Ms. Bishop, seconded by Ms. Keun, to move Karen Fournier, Lower Township, to the Executive Committee in absence of Scott Wahl, Avalon, for voting purposes. All in Favor. Motion Carried.

**APPROVAL OF MINUTES – OPEN SESSION**

Chair Woods entertained a motion to approve the meeting minutes of the February 21, 2024 Executive Committee Meeting.

Motion by Ms. Fournier, seconded by Ms. Bishop, to approve the meeting minutes of the February 21, 2024 Executive Committee Meeting as presented. All in Favor. Motion carried by unanimous vote.

**APPROVAL OF MINUTES – CLOSED SESSION**

Confidential Closed Session Meeting Minutes were distributed to the Executive Committee Members.

Chair Woods entertained a motion to adopt the Closed Session Meeting Minutes of the February 21, 2024 Executive Committee meeting.

Motion by Ms. Bishop, seconded by Ms. Seib, to approve the Closed Session minutes of the February 21, 2024 Executive Committee meeting as presented. All in Favor. Motion carried by unanimous vote.

The Closed Session meeting minutes of the February 21, 2024 meeting shall not be released to the public until the reason(s) for their remaining closed is no longer applicable and the Fund Solicitor has had the opportunity to review them.

Confidential Closed Session Meeting Minutes were collected.

**CLOSED SESSION - RESOLUTION #2024-21**

Be it moved by the Atlantic County Municipal Joint Insurance Fund that the public be excluded from this portion of the meeting to permit the Executive Committee to consider in closed session matters affecting the safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations and that the minutes covering these matters and the results of closed session will be released to the public when the reasons for discussing and on them in closed session no longer exists as required by the Open Public Meeting Act.

Chair Woods entertained a motion to adopt Closed Session Resolution 2024-21.

Motion by Ms. Keun, seconded by Ms. Fournier, to adopt Resolution 2024-21 as presented.

**ROLL CALL**

*Yeas:*

Heather Miller, **Commercial**  
Dawn Marie Bascelli, **Deerfield Twp.**  
Jessica Bishop, Sec., **Dennis Twp.**  
Karen Fournier, **Lower Twp.**  
Varvara Keun, **Middle Twp.**  
Liz Woods, *Chair*, **Ocean City**  
Kellie Seib, **Sea Isle City**

*Nays:*

None

*Abstain:*

None

Motion carried by unanimous vote.

***REOPEN PUBLIC PORTION OF THE MEETING***

Chair Woods entertained a motion to reopen the public portion of the meeting.

Motion by Ms. Keun, seconded by Ms. Seib, to reopen the public portion of the meeting. All in favor. Motion carried.

***AUTHORIZATION OF CLAIMS PAYMENTS***

The claims for payment were presented as discussed in *Closed Session*.

Chair Woods asked if there were any questions at this time. No questions were entertained.

Chair Woods entertained a motion to approve the claims for payment as discussed in *Closed Session*.

Motion by Ms. Keun, seconded by Ms. Miller to approve the claims payments as discussed in *Closed Session*.

They are as follows:

**February 2024 PARs:**

<b><i>Workers' Compensation</i></b>	<b><i>Property</i></b>	<b><i>GL</i></b>
2021221162 (03) MLT-2021221151 (01-03)	2024324892	2021214185
2024320664	2024314714	2022256707
2023308010	2021234993	2021217952
2024321509	2022242606	20212140701
2024324531	2024315535	
2021224070	2024324029	
2024326676		
2023282203		
2024313044		
2022260883		
2021214307		
2024326622		
2023288295		
2022256459		
2022250708		

**ROLL CALL**

***Yeas:***

Heather Miller, **Commercial**  
 Dawn Marie Bascelli, **Deerfield Twp.**  
 Jessica Bishop, Sec., **Dennis Twp.**  
 Karen Fournier, **Lower Twp.**  
 Varvara Keun, **Middle Twp.**  
 Liz Woods, *Chair*, **Ocean City**  
 Kellie Seib, **Sea Isle City**

***Nays:***

None

***Abstain:***

None

Motion carried by unanimous vote.



**ABANDON SUBROGATION**

There were no (0) files presented for Abandonment of Subrogation.

**CLAIMS REVIEW COMMITTEE REPORT – OPEN SESSION ITEMS**

Ms. Canesi noted that twenty-five (25) PARs including fifteen (15) Workers’ Compensation (7 Police, 3 Fire, and 5 Other), four (4) General Liability, zero (0) Auto, and six (6) Property claims were reviewed for settlement, continuing defense, or to advise of trial date.

Ms. Canesi reported to members that the recent claims audit completed by NorthShore results were discussed. This audit covered claims from 2018-2022 and was designed to measure the effectiveness and efficiency of the established policies and best practices procedures within Qual-Lynx. Utilizing a scale of 1 to 3, the overall score was 2.7 out of 3. There were strengths as well as some opportunities for improvement listed. The Committee received a plan from Qual-Lynx to address the findings and the Executive Director’s office will follow up with the TPA. Ms. Canesi asked that the claims audit be provided to the members of the Executive Committee by the Executive Director’s office. Mr. Forlenza noted that the claims audit will be distributed to the Executive Committee for review this week.

Ms. Canesi asked if there were questions. No questions were entertained.

**CLAIMS ADMINISTRATOR’S REPORT**

**Lessons Learned from Losses – March**

Mr. Roselli reported that the Lessons Learned from Losses this month focuses on *Office/Building Safety*. He noted that he outlined items on page 16 that can prevent some office mishaps and make your buildings safer. Not every claim is preventable, but some of these items will assist.

Mr. Roselli stated that recently a member of the public slipped in a municipal building. The fund commissioner was made aware and immediately inspected the area, photographed it and filled out an incident report. This is exactly what TO DO to help defend potential claims.

Mr. Roselli also noted that pages 17-20 are the updated “road maps” for reporting claims. These are broken out into claim type and who to contact. These can be found on the ACM website at [www.acmjif.org](http://www.acmjif.org)

The remainder of the Claims Administrator’s report was provided in Closed Session.

**MANAGED HEALTH CARE REPORT**

**Lost Time v. Medical Only Cases**

Ms. Beatty presented the ACM JIF Lost Time v. Medical Only Cases (Intake Report).

	<b>Feb</b>	<b>YTD</b>
<i>Total Intakes (New Claims)</i>	38	83
<i>Report Only</i>	10	21
<i>Report Only % of Total</i>	26%	25%
<i>Medical Only</i>	22	44
<i>Lost Time</i>	4	15

<i>Medical Only/Lost Time Ratio</i>	85:15	75:25
<i>Occupational, Claim Petition, Cancer Presumption</i>	2	2
<i>COVID-19</i>	0	0
<i>Average Days to Report to QL</i>	0.8	1.5
<i>Average Days to Report to employer</i>	0.2	0.3

***Nurse Case Management:***

Ms. Beatty presented the self-explanatory *Nurse Case Management Report*.

<b><i>Nurse Case Management</i></b>	<b><i>Feb</i></b>
<i># of Cases Assigned to Case Management</i>	84
<i># of Case &gt; 90 days</i>	63

***PPO Penetration Report:***

Ms. Beatty presented the self-explanatory *PPO Penetration Rate Report*.

<b><i>PPO Penetration Rate</i></b>	<b><i>Feb</i></b>	<b><i>YTD</i></b>
<i>Bill Count</i>	463	1,022
<i>Original Provider Charges</i>	\$703,736	\$1,561,393
<i>Re-priced Bill Amount</i>	\$204,621	\$456,120
<i>Savings</i>	\$499,116	\$1,105,274
<i>% of Savings</i>	71%	71%
<i>Participating Provider Penetration Rate- Bill count</i>	97%	98%
<i>Participating Provider Penetration Rate-Provider Charges</i>	97%	98%
<i>EPO Penetration Rate – Bill Count</i>	98%	98%
<i>EPO Penetration Rate –Provider Charges</i>	99%	99%

***Transitional Duty Report***

Ms. Beatty presented the *Transitional Duty reports*.

<b><i>Transitional Duty Summary Report</i></b>	<b><i>YTD</i></b>
<i>Transitional Duty Days Available</i>	1,041
<i>Transitional Duty Days Worked</i>	721
<i>% of Transitional Duty Days Worked</i>	69%
<i>Money Saved by Accommodating</i>	\$72,390
<i>Transitional Duty Days NOT Accommodated</i>	320
<i>% of Transitional Duty Days NOT Accommodated</i>	31%
<i>Cost of Days NOT Accommodated</i>	\$33,411

Ms. Beatty reported that starting **May 1, 2024**, Qual-Lynx would partner with Enlyte ScriptAdvisor for Pharmacy Benefit Management (PBM) services in New Jersey. ScriptAdvisor is a leading PBM solution provider in the workers' compensation industry. They have a wide network of pharmacies, including popular ones like Walgreens and CVS. The fill rate was \$3 and will be \$1 with ScriptAdvisor. The PBM program includes customized drug formularies, opioid and compound drug controls, pharmacist oversight, 24/7 support, and savings reporting. The transition will not interrupt patient care, and Qual-Lynx will

provide First Fill letters to ensure no out-of-pocket expenses for medications by existing claimants. She asked members to review her report in the agenda packet.

Ms. Beatty also announced her retirement at the end of March, but assisting in the transition of the new employee through May. Chair Woods congratulated Ms. Beatty.

Ms. Beatty asked if there were any questions. No questions were entertained.

### ***LAW ENFORCEMENT LIABILITY CONSULTANT REPORT***

Mr. Winter provided his report which can be found on pages 30-35 of the agenda.

Mr. Winter noted policy and procedure requests have been received and will be forwarded to requesting agencies that will contain current L/E best practices. He noted agency visits are ongoing with 4 completed in February. The training for Report Writing and Management of Aggressive Behavior (use of force) and are pending. He noted that he will meet with the ACM L/E Committee on March 25, 2024.

Mr. Winter stated that his attached bulletin on page 32 covers a lot of items already being discussed in the JIF such as motor vehicle accidents with officers, injuries sustained during arrests, fatigue in the job, EAP availability, and staffing shortages. He encouraged members to read his bulletin.

Mr. Winter asked if there are any questions. No questions were entertained.

### ***SOLICITOR'S REPORT***

#### ***Closed Claims***

Mr. DeWeese reported there were six (6) cases closed since last month and four (4) with no payment to the Plaintiff.

*Koch (minor) v. City of Absecon*  
*Smith v. Township of Egg Harbor*  
*Gerace (minor) v. Township of Middle*  
*Benitez v. City of Pleasantville*  
*Ronochi v. City of Ventnor*  
*Bernal v. City of Woodbine*

#### ***MEL EPL Helpline***

Mr. DeWeese stated that there is a reminder in the agenda packet regarding the MEL EPL Helpline on page 36. He also urged members to review the MEL EPL Helpline Authorized Contact list on pages 37-38 and update them. He noted that if you have a "N/A", he strongly recommends to get someone appointed so they have access to this service. The resolution to make these changes is on the ACM JIF website. He noted that many members are using this Helpline as it is very beneficial.

Mr. DeWeese stated that he recently participated in a MEL EPL Committee meeting and it was noted by Mr. Pevner from Summit Risk that the use of the Helpline is eliminating potential claims.

Mr. DeWeese highlighted that on page 9 of the Claims Review Committee meeting minutes are the six (6) cases closed since last month of which four (4) had no payment. He stated this leaves 84 active GL cases.

#### ***Proposed Revised Litigation Management Guidelines***

Mr. DeWeese announced that he had completed proposed revisions to the Litigation Management Guidelines (LMG). He noted that he is recommending substantial revisions to the LMG, and he explained that the last update was completed in 2017 and there have been significant changes in processes and procedures since that last revision. The Claims Review Committee was asked to review these at the March

meeting. Mr. DeWeese stated that he would like to present a resolution along with the revised Litigation Management Guidelines to the Executive Committee in April for adoption. In addition, Mr. DeWeese will include updated form reports as an appendix.

***Indemnification and Hold Harmless Provisions***

Mr. DeWeese noted that he has had several questions regarding indemnification and hold harmless requirements which are on the ACM JIF website. These are also in the process of being revised as well as the insurance requirements and will be sent out shortly for review. He would like to present a resolution along with the revised Indemnification and Hold Harmless Guidelines to the Executive Committee in April for adoption.

**COMMITTEE REPORTS**

***Safety Committee Meeting Minutes – February 22, 2024***

In Mr. Wahl's absence, Mr. Forlenza reported that the Safety Committee met on February 22, 2024 and the minutes are included in the agenda. He stated that action needs to be taken to adopt the revised Safety Committee Charter at tonight's meeting. He noted that the annual Safety Director's report was discussed and is attached to the minutes. He reported that eleven (11) members are up for renewal 1/1/25 and inspections by the Safety Director will be completed. He stated that loss ratio reports were discussed and that the ACM JIF continues to perform poorly at the MEL level with 128% loss ratio as of 12/31/23. He noted that the 12/31/23 snapshots can be found in Origami for your review. The Committee also discussed the upcoming Safety Breakfast and the Safety and Claims Coordinator Roundtable. The next meeting is May 16, 2024.

Mr. Forlenza noted that the revisions to the charter are shown in red on page 47. Since the Wellness Program was suspended, the Committee recommended removal of the Wellness Director as a member of the Safety Committee. Some additional changes have to do with the wellness program. He noted that also that the Safety Committee minutes prepared by his office, will be approved by the Safety Committee Chair.

***Motion to Adopt the Revised Safety Committee Charter***

Chair Woods entertained a motion to adopt the revised Safety Committee Charter.

Motion by Ms. Bascelli, seconded by Ms. Seib to adopt the revised Safety Committee Charter as presented. All in favor. Motion carried by unanimous vote.

***Motion to Adopt the Claims Review Committee Charter***

Mr. Forlenza stated that attached to the Claims Review Committee minutes is the revised Claims Review Committee Charter. He stated there was a proposed revision to add the Safety Director as a member of the Claims Review Committee. He noted that the Safety Director is already present at the meetings, but will add this language.

Chair Woods entertained a motion to adopt the revised Claims Review Committee Charter.

Motion by Ms. Bishop, seconded by Ms. Keun to adopt the revised Claims Review Committee Charter as presented. All in favor. Motion carried by unanimous vote.

**EXECUTIVE DIRECTOR'S REPORT**

***EJIF Survey***- Mr. Forlenza noted that the EJIF sent a survey to gather members' exposure data and they are still in need of six (6) members' responses; Absecon, Downe Twp, Upper Twp, West Cape May, Wildwood and Woodbine. He asked the Fund Commissioners to please complete the survey and forward back to Rich Erikson at the EJIF as soon as possible. He noted this is needed to identify certain items like underground storage tanks and other environmental exposures. The EJIF will then arrange to come out later this spring to meet with you. He noted that fifteen (15) surveys have been completed.

**JIF Directories** – Mr. Forlenza noted that last month the updated JIF directories were posted to the website. Please review them as the information comes directly from Origami so any errors in emails, mailing addresses, phone numbers, need to be corrected in Origami. Please also let our office know what is being corrected.

**Certificates of Insurance** - Mr. Forlenza noted that a list of the certificates of insurance issued are included in the agenda. He asked members to review and please make sure that these were requested by your municipality and issued properly. He asked that you reach out to Ed Cooney at the Underwriter's office if there are any questions.

**Safety, OSB, and EPL/Cyber Reimbursement**- Mr. Forlenza stated that the OSB, and EPL/Cyber balances for 2024 are listed in the agenda. Please submit the purchases made as soon as possible and do not wait until the deadline. The deadline to encumber the funds is December 31, 2024 and he noted that the Safety Incentive Program award money letter will be sent following the announcements at the Safety Breakfast on March 28, 2024 at Merighi's Savoy Inn, Vineland, NJ.

**Elected Officials Training** - Mr. Forlenza stated that the Elected Officials training is available to all members through the MSI. He stated that the credit is \$250 per Elected Official, capped at 5% of a member's 2024 MEL assessment. He noted that the turnout is still very low this year. He will send a reminder out to all members. He asked that you encourage your elected officials to take this training to receive the credit.

**Payroll Audit** – Mr. Forlenza stated that on or about February 15, 2024 a letter was emailed to all Municipal Clerks, with a copy to Fund Commissioners, advising that Bowman & Company will be performing workers' compensation exposure verification audits of members' 2023 payrolls. These payroll figures will serve as the basis for your 2025 workers' compensation excess premiums. Attached to the email was a spreadsheet that included employee counts by payroll classification as reported during last year's payroll audit. As employee counts have a tendency to be the most time consuming part of the payroll audit process, members were asked to review and update this spreadsheet upon receipt. Members are asked to send the required payroll data to the auditors for processing either via mail or electronically no later than March 12, 2024. Details on how to upload your information to Bowman was included in the February 15, 2024 correspondence. Once the information is processed, the auditor will contact each town to discuss the results of the audit and clarify any questions. Members who still have questions following the audit can contact a representative from Bowman to set up a mutually convenient date and time to meet and discuss the audit results.

**Property Appraisals** – Mr. Forlenza reported that on or about February 15, 2024, each member and their RMC's received a notification from our office asking that they review and update their property schedule located in the Origami Exposure Data Management System. Once a member responds, those that are going to receive a physical appraisal this year will be contacted by the Fund Property Appraiser, ASSETWORKS. Those that are not receiving a physical inspection in 2024 will have their building & contents values trended accordingly. All members are asked to complete the review and update process no later than March 25, 2024.

**2024 Safety Kickoff Breakfast** - Mr. Forlenza stated that the Safety Breakfast will be held on March 28, 2024 at Merighi's Savoy Inn, Vineland, NJ.

**Safety and Claims Coordinator Roundtable** - Mr. Forlenza noted that the Safety and Claims Coordinator Roundtable will be held online on April 30, 2024 via Teams.

**New Fund Commissioner Orientation** – Mr. Forlenza noted that Ms. Patel is finalizing the New Fund Commissioner Orientation and members will be notified of the two training dates.

**Financial Disclosure Statement Filing** – Mr. Forlenza stated the Division of Local Government Services

will notify us that the database is open and then each Fund Commissioner will file for their position of Fund Commissioner with the JIF using their unique PIN number. Newly appointed Fund Commissioners receive their Filing PIN # from our office once we are notified of their appointment. Any newly appointed Fund Commissioner that has not yet received their PIN# from the Executive Director's office, or has any questions, should contact Kris Kristie at Kristi\_Kristie@rpadmin.com. Additional information will be sent to all Fund Commissioners once it is released by the Department of Community Affairs.

**JIF Website** – Mr. Forlenza noted that we are still working on the Members Only Section of the JIF website. He reported that all will be notified as soon as it is complete.

Mr. Forlenza asked if there were any questions. No questions were entertained.

### ***SAFETY DIRECTOR'S REPORT***

Mr. Garish stated that the Safety Director's Report begins on page 124. He stated that the report is self-explanatory.

Mr. Garish noted his report shows all activities for the month of February. He reminded members of the two training platforms: MSI LIVE and MSI NOW.

Mr. Garish stated that a new Work Zone Training was added for Police Officers, which mimics NIMS training. These will be held April 2, 2024 and May 16, 2024 on MSI LIVE.

Mr. Garish reminded members to inspect their playgrounds and parks with the warmer weather. Any assistance can be scheduled with his office. Mr. Garish posted some relevant bulletins in the chat.

MSI Safety Expo – Mr. Garish noted that another Safety Expo is scheduled for May 21, 2024 at Atlantic Community College and will have 4 different tracks of training. Excavation, Trenching and Shoring is one 4 hr. track; Leadership; and the Fast Track for Safety covering multiple topics. All information is on the J. A. Montgomery website or contact Mr. Garish directly.

Mr. Garish also requested that any member with new Safety Coordinators, please contact his office and update their lists. He will then schedule a meeting with them individually.

Mr. Garish asked if there were any questions. No other questions were entertained.

### ***TECHNOLOGY RISK SERVICES DIRECTOR'S REPORT***

Mr. Caruso asked the members to review his report beginning on page 127. He noted that February began the new Wizer training and as of today is 85% of members are compliant with this training. He did note that 3% have not opened the email. He will reach out to the members who have not started.

Mr. Caruso stated that anyone with critical issues were contacted by D2.

Mr. Caruso reiterated that the Cyber framework form for compliance with the "basic" standards is on the Cyber JIF website. Compliance with these standards helps reduce your deductible for a cyber-related incident. He noted that he would be working hard to get all members into at least the "basic level" of protection. ACM JIF is 62% compliant as of today.

Mr. Caruso reported that his bulletin this month is "Securing Office 365 Email". He has received several phone calls and thus put together good suggestions on securing it. Number 16 and 17 are his favorites.

Mr. Caruso asked if there were any questions. No questions were entertained.

### ***TREASURER'S REPORT***

#### **Reports – February**

Mr. Hansen presented the Treasurer's Report for the period ending **February 29, 2024**. The reports were made part of the agenda packet beginning on page 130. He noted the following information:

**A.E.L.C.F. PARTICIPANT BALANCES**

<b>Member</b>	<b>2/29/24 (Includes unaudited interest)</b>
Corbin City	828.00
Egg Harbor City	43,908.11
Egg Harbor Township	143,563.00
Hamilton Township	2,001.62
Hammonton Township	231,959.00
Middle Township	180,840.17
Mullica Township	28,953.08
Northfield	115,129.92
Pleasantville City	12.21
Stone Harbor	9,824.62
Upper Deerfield Township	76,826.40
Upper Township	220,157.61
Waterford Township	35,660.80
<b>Total</b>	<b>\$1,089,724.54</b>

**Activity:**

AELCF	941,069.75
Unaudited Interest	21,801.79
2023 Dividends Transferred	214,182.00
Dividends Applied to Assessment	<87,329.00>
AELCF 1/31/24	1,089,724.54

**Receipt Activity for the Period:**

	<b>February</b>	<b>YTD</b>
Subrogation Receipts	\$106,800.18	\$144,911.88
Other	\$0	\$0

Adjustment	\$0	\$21,606.01
Assessments	\$4,419,795	

***Claim Activity for the Period***

Claim activity for the month of **February** for claims paid by the Fund and claims payable by the Fund depict a total of 334 checks issued representing 884 claims payments totaling \$839,444.56, with an effect on cash position of \$717,254.58.

***Cash Activity for the Period***

The Fund's "Cash Position" at month end for **February** was \$49,540,465.85

***Investment Interest***

<b>Interest Income:</b>	<b>February</b>	<b>YTD</b>
JCMI	\$36,154.42	\$72,535.81
Treasury	\$131,168.48	\$517,747.69
Citizens	\$4,956.25	\$23,182.77
Citizens-sweep	\$13,371.11	\$16,132.53

***Rate of Return:*** Only interest from the *ANALYSIS WORKSHEET 3.24%* for **February**.

***Allocation of Invested Funds***

<b>FUND</b>	<b>January Total</b>	<b>January Percentage</b>	<b>February Total</b>	<b>February Percentage</b>
Treasury	\$22,022,399.00	49%	\$23,061,960.90	47%
JCMI	\$20,400,066.58	43%	\$20,318,090.99	41%
Citizens	\$3,899,402.95	8%	\$6,160,413.96	12%
<b>TOTALS</b>	\$47,321,868.53		\$49,540,465.85	

Mr. Hansen asked if there were any questions. No questions were entertained.

***Payment Register***

Chair Woods entertained a motion to approve the ***February 2024 Payment Register*** (Claims Activity).

Chair Woods asked if there were any questions at this time. No questions were entertained.

Motion by Ms. Bishop, seconded by Ms. Seib to approve the ***February 2024 Payment Register*** (Claims Activity) as submitted.

**ROLL CALL**

***Yeas:***

Heather Miller, **Commercial**  
 Dawn Marie Bascelli, **Deerfield Twp.**  
 Jessica Bishop, Sec., **Dennis Twp.**  
 Karen Fournier, **Lower Twp.**  
 Varvara Keun, **Middle Twp.**



Liz Woods, *Chair, Ocean City*  
Kellie Seib, *Sea Isle City*

*Nays:* None  
*Abstain:* None

Motion carried by unanimous vote.

***Bill List – March***

For the Executive Committee’s consideration, Mr. Hansen presented the ***March 2024 Bill List*** in the amount of **\$274,510.72**.

Chair Woods asked if there were any questions at this time. No questions were entertained.

Chair Woods entertained a motion for approval of the ***March 2024 Bill List***.

Motion by Ms. Bishop, seconded by Ms. Keun, to approve the ***March 2024 Bill List*** as presented.

**ROLL CALL**

*Yeas:* Heather Miller, **Commercial**  
Dawn Marie Bascelli, **Deerfield Twp.**  
Jessica Bishop, Sec., **Dennis Twp.**  
Karen Fournier, **Lower Twp.**  
Varvara Keun, **Middle Twp.**  
Liz Woods, *Chair, Ocean City*  
Kellie Seib, *Sea Isle City*

*Nays:* None  
*Abstain:* None

Motion carried by unanimous vote.

***MEL/RCF/CYBER/EJIF REPORTS***

Mr. Forlenza encouraged any members that have an interest in being the MEL, RCF, and/or E-JIF representative to let him know, as we need a representative from our JIF. The MEL/RCF/Cyber meets 4-5 times yearly in person in Jamesburg, NJ. The next meeting is this Friday, March 22, 2024.

Mr. Forlenza asked that any member interested in being a MEL, RCF or EJIF representative to please contact his office to discuss further. He also stated that the role can be split with different representatives.

Mr. Merchel introduced himself noting that he was the former Chair of the PMM JIF and was the representative to the MEL/RCF/EJIF and can answer any questions. He stated that great information comes out of the meetings and being this representative is a good experience. He noted the meeting begins at 9am and lasts until noon in Jamesburg, NJ.

Mr. Pacanowski, Ventnor, the Cyber JIF representative for 2024, volunteered as the MEL/RCF/EJIF representative if no one else steps up.

**MISCELLANEOUS BUSINESS**

***Next Meeting***

Chair Woods reminded the members that the next meeting will be held IN PERSON on **Wednesday, April 17, 2024 at 3:00 PM** at the Atlantic County Library, Mays Landing, NJ.

**PUBLIC COMMENT**

***Open Public Comment***

Chair Woods entertained a motion to open the meeting to the public for comment.

Motion by Ms. Bishop, seconded by Ms. Keun, to open the meeting to the public. All in favor. Motion carried.

***Close Public Comment***

Chair Woods entertained a motion to close the public comment.

Motion by Ms. Bishop, seconded by Ms. Keun, to close the meeting to the public. All in favor. Motion carried.

**MOTION TO ADJOURN**

Motion by Ms. Keun, seconded by Ms. Seib, to adjourn the March 20, 2024 meeting of the ACM JIF. All in favor. Motion carried.

The meeting was adjourned at 4:08 PM.

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Tracy Forlenza, *Recording Secretary* for

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**Jessica Bishop**, *Fund Secretary*

# LESSONS LEARNED FROM LOSSES

## APRIL 2024 NEWSLETTER SUBROGATION



- When the JIF pays a Property or Workers' Compensation claim it has a right to subrogate if it is believed that someone else caused or contributed to the damage or injury. Subrogation allows the JIF to recoup certain claim costs from an at-fault party.
- Qual-Lynx and the office of JIF Solicitor, David DeWeese, undertake these efforts.
- In 1<sup>st</sup> party property we seek all damages including your deductible.
- In Workers' Compensation, we seek the amount paid for medical treatment, lost wages, and the face value of an award.
- Any amount recovered reduces how much was paid on that claim and therefore reduces the amount of your town's overall claims payments which reduces your insurance costs.
- The assistance of the town can be an integral part of the level of success achieved.

### Example:

- An officer injured his elbow taking an intoxicated subject into custody. He underwent surgery to repair the injury and the total amount of the lien sought in subrogation against the intoxicated subject was almost \$54,000. We enlisted the help of the Solicitor's office as we were not finding success with our subrogation efforts. Their office had to file suit and the matter went to trial. The Judge found that the Defendant acted in a negligent manner, but we could not prove that the employee's injuries were caused by the Defendant's actions. The employee did not report the injury or seek medical treatment for almost a month and there was no mention of the injury in any of the incident reports.



Atlantic County Municipal JIF  
Managed Care Summary Report  
2024

<b>Intake</b>	<b>March-24</b>	<b>March-23</b>	<b>2024 March YTD</b>	<b>2023 March YTD</b>
# of New Claims Reported	46	52	130	156
# of Report Only	16	23	37	63
% Report Only	35%	44%	28%	40%
# of Medical Only	26	23	69	67
# of Lost Time	4	6	23	26
Medical Only to Lost Time Ratio	77:23	79:21	75:25	72:18
Claim Petition First Notice/Occupational COVID-19	0	0	1	0
Average Days Reported To Qual-Lynx (Indemnity, Medical Only, Report Only)	1.6	5.8	6.3	7.6
Average Days Reported to Employer (Indeminty, Medical Only, Report Only)	0.3	4.7	0.9	2.4

<b>Nurse Case Management</b>	<b>March-24</b>	<b>March-23</b>
# of Cases Assigned to Case Management	87	91
# of Cases > 90 days	68	73

<b>Savings</b>	<b>March-24</b>	<b>March-23</b>	<b>2024 March YTD</b>	<b>2023 March YTD</b>
Bill Count	604	642	1626	1582
Provider Charges	\$711,067	\$822,154	\$2,272,460	\$1,771,657
Repriced Amount	\$202,288	\$291,042	\$658,408	\$583,985
Savings \$	\$508,778	\$531,111	\$1,614,052	\$1,187,672
% Savings	72%	65%	71%	67%

<b>QualCare Network Provider Penetration Rate</b>	<b>March-24</b>	<b>March-23</b>	<b>2024 March YTD</b>	<b>2023 March YTD</b>
Bill Count	96%	94%	97%	94%
Provider Charges	96%	96%	97%	96%

<b>Exclusive Provider Panel Penetration Rate</b>	<b>March-24</b>	<b>March-23</b>	<b>2024 March YTD</b>	<b>2023 March YTD</b>
Bill Count	97%	96%	98%	96%
Provider Charges	97%	95%	98%	97%

<b>Transitional Duty Summary</b>		<b>2024 March YTD</b>	<b>2023 March YTD</b>
% of Transitional Duty Days Worked		77%	67%
\$ Saved By Accommodating		\$149,176	\$128,206
% of Transitional Duty Days Not Accommodated		23%	33%
Cost Of Days Not Accommodated		\$47,819	\$75,512



**Atlantic County Municipal JIF  
Average Days To Report By JIF Member  
(Indemnity, Medical Only, Report Only)  
1/1/2024 - 3/31/2024**

	# Of Claims Reported	Average Days Reported To Qual-Lynx	Average Days Reported To Employer
ABSECON CITY	2	2.0	0.0
AVALON BOROUGH	2	1.0	1.0
BRIGANTINE CITY	1	0.0	0.0
CAPE MAY CITY	9	1.6	0.8
DEERFIELD TOWNSHIP	2	1.0	0.0
DENNIS TOWNSHIP	1	0.0	0.0
GALLOWAY TOWNSHIP	10	1.0	0.4
HAMILTON TOWNSHIP	5	1.2	0.0
LINWOOD CITY	1	2.0	0.0
LONGPORT BOROUGH	5	1.2	0.0
LOWER TOWNSHIP	7	2.3	0.6
MARGATE CITY	6	0.7	0.0
MIDDLE TOWNSHIP	9	5.3	0.0
MILLVILLE CITY	7	3.1	0.0
MULLICA TOWNSHIP	1	3.0	0.0
NORTH WILDWOOD CITY	5	2.6	1.2
NORTHFIELD CITY	1	35.0	35.0
OCEAN CITY	14	1.4	0.6
PLEASANTVILLE CITY	12	0.8	0.5
SEA ISLE CITY	4	10.0	9.5
SOMERS POINT CITY	5	2.6	1.6
STONE HARBOR BOROUGH	2	7.0	0.5
UPPER TOWNSHIP	3	1.3	0.0
VENTNOR CITY	3	0.3	0.0
WATERFORD TOWNSHIP	1	1.0	0.0
WEST WILDWOOD BOROUGH	1	175.0	0.0
WILDWOOD CITY	8	0.8	0.0
WILDWOOD CREST BOROUGH	1	1.0	0.0
WOODBINE BOROUGH	1	1.0	1.0
<b>Grand Total</b>	<b>129</b>	<b>3.7</b>	<b>0.9</b>



**Atlantic County Municipal JIF  
Claims Reported By Claim Type**

**March 2024**

<b>All Claims Reported</b>			
	<b># Of Claims Reported</b>	<b>Average Days Reported To Qual-Lynx</b>	<b>Average Days Reported To Employer</b>
INDEMNITY	4	0.5	0.0
MEDICAL ONLY	26	2.0	0.6
REPORT ONLY	16	1.3	0.0
<b>Grand Total</b>	<b>46</b>	<b>1.6</b>	<b>0.3</b>

**1/1/2024 - 3/31/2024**

<b>All Claims Reported</b>			
	<b># Of Claims Reported</b>	<b>Average Days Reported To Qual-Lynx</b>	<b>Average Days Reported To Employer</b>
Claim Petition	1	343.0	0.0
INDEMNITY	23	1.6	0.4
MEDICAL ONLY	68	5.1	1.5
REPORT ONLY	37	2.5	0.2
<b>Grand Total</b>	<b>129</b>	<b>6.3</b>	<b>0.9</b>

**Claims Reported - Not Covid-19**

	<b># Of Claims Reported</b>	<b>Average Days Reported To Qual-Lynx</b>	<b>Average Days Reported To Employer</b>
INDEMNITY	4	0.5	0.0
MEDICAL ONLY	26	2.0	0.6
REPORT ONLY	16	1.3	0.0
<b>Grand Total</b>	<b>46</b>	<b>1.6</b>	<b>0.3</b>

**Claims Reported - Not Covid-19**

	<b># Of Claims Reported</b>	<b>Average Days Reported To Qual-Lynx</b>	<b>Average Days Reported To Employer</b>
Claim Petition	1	343.0	0.0
INDEMNITY	23	1.6	0.4
MEDICAL ONLY	68	5.1	1.5
REPORT ONLY	37	2.5	0.2
<b>Grand Total</b>	<b>129</b>	<b>6.3</b>	<b>0.9</b>

**Covid-19 Claims Reported**

None Reported

**Covid-19 Claims Reported**

None Reported



**Atlantic County Municipal JIF  
Nurse Case Management Report  
March 2024**

**# Of Claims Open to Nurse Case Management**

	Open		Re-Open		GRAND TOTAL
	INDEMNITY	MEDICAL ONLY	INDEMNITY	MEDICAL ONLY	
AVALON BOROUGH	2	0	0	0	2
BRIGANTINE CITY	4	0	0	0	4
CAPE MAY CITY	1	1	0	0	2
DENNIS TOWNSHIP	1	0	0	0	1
EGG HARBOR TOWNSHIP	6	0	1	0	7
GALLOWAY TOWNSHIP	2	0	0	0	2
HAMILTON TOWNSHIP	5	1	2	0	8
LINWOOD CITY	1	0	0	0	1
LONGPORT BOROUGH	2	0	0	0	2
LOWER TOWNSHIP	1	1	0	0	2
MARGATE CITY	2	0	1	0	3
MIDDLE TOWNSHIP	2	0	0	0	2
MILLVILLE CITY	4	2	0	0	6
NORTH WILDWOOD CITY	3	0	0	0	3
OCEAN CITY	5	0	2	0	7
PLEASANTVILLE CITY	8	4	2	1	15
SEA ISLE CITY	2	0	1	0	3
SOMERS POINT CITY	1	2	0	0	3
STONE HARBOR BOROUGH	2	1	0	0	3
UPPER TOWNSHIP	3	0	0	0	3
VENTNOR CITY	4	1	1	0	6
WILDWOOD CITY	1	0	1	0	2
<b>Grand Total</b>	<b>62</b>	<b>13</b>	<b>11</b>	<b>1</b>	<b>87</b>



**Atlantic County Municipal JIF  
Transitional Duty Summary Report  
1/1/2024 - 3/31/2024**

	Transitional Duty Days Available	Transitional Duty Days Worked	% Of Transitional Duty Days Worked	\$ Saved By Accommodating	Transitional Duty Days Not Accommodated	% Of Transitional Duty Days Not Accommodated	Cost Of Days Not Accommodated
BRIGANTINE CITY	103	103	100%	\$12,820	0	0%	\$0
CAPE MAY CITY	23	14	61%	\$1,562	9	39%	\$1,004
EGG HARBOR TOWNSHIP	101	101	100%	\$11,303	0	0%	\$0
GALLOWAY TOWNSHIP	51	51	100%	\$4,685	0	0%	\$0
HAMILTON TOWNSHIP	115	67	58%	\$10,825	48	42%	\$7,536
LINWOOD CITY	48	48	100%	\$6,480	0	0%	\$0
LONGPORT BOROUGH	24	0	0%	\$0	24	100%	\$3,758
LOWER TOWNSHIP	178	39	22%	\$3,492	139	78%	\$13,087
MARGATE CITY	65	65	100%	\$8,049	0	0%	\$0
MIDDLE TOWNSHIP	124	124	100%	\$9,022	0	0%	\$0
MILLVILLE CITY	29	29	100%	\$1,996	0	0%	\$0
NORTH WILDWOOD CITY	34	34	100%	\$2,420	0	0%	\$0
NORTHFIELD CITY	3	3	100%	\$415	0	0%	\$0
OCEAN CITY	132	70	53%	\$4,849	62	47%	\$7,073
PLEASANTVILLE CITY	248	213	86%	\$30,579	35	14%	\$5,267
SEA ISLE CITY	87	81	93%	\$9,363	6	7%	\$259
STONE HARBOR BOROUGH	249	167	67%	\$11,445	82	33%	\$7,546
UPPER TOWNSHIP	28	28	100%	\$3,482	0	0%	\$0
VENTNOR CITY	125	103	82%	\$9,379	22	18%	\$1,414
WILDWOOD CITY	73	68	93%	\$4,787	5	7%	\$352
WILDWOOD CREST BOROUGH	21	17	81%	\$2,222	4	19%	\$523
<b>Grand Total</b>	<b>1861</b>	<b>1425</b>	<b>77%</b>	<b>\$149,176</b>	<b>436</b>	<b>23%</b>	<b>\$47,819</b>





**Atlantic County Municipal JIF  
PPO Savings Report  
March 2024**

	Bill Count	Provider Charges	Repriced Amount	\$ Savings	% Savings
QualCare PPO	577	\$685,523	\$179,921	\$505,602	74%
Negotiated	3	\$2,750	\$2,085	\$665	24%
Out Of Network	24	\$22,794	\$20,282	\$2,511	11%
<b>Grand Total</b>	<b>604</b>	<b>\$711,067</b>	<b>\$202,288</b>	<b>\$508,778</b>	<b>72%</b>

	EPO	Negotiated	Out Of Network	QualCare PPO	Grand Total	\$ Savings
Ambulance	0	0	4	0	4	\$649
Ambulatory Surgical Center	0	0	0	14	14	\$124,716
Anesthesiology	0	0	1	9	10	\$13,603
Behavioral Health	3	3	1	0	7	\$1,202
Durable Medical Equipment	1	0	6	0	7	\$1,122
Emergency Medicine	0	0	11	0	11	\$209
Hospital	0	0	0	18	18	\$59,939
MRI/Radiology	20	0	0	8	28	\$19,157
Neurology	1	0	0	0	1	\$75
Neurosurgery	12	0	0	0	12	\$5,192
Occupational Medicine	1	0	0	10	11	\$3,155
Orthopedic Surgery	51	0	0	6	57	\$109,445
Other	0	0	0	5	5	\$3,275
Pain Management	0	0	0	1	1	\$134
Physical Medicine & Rehab	22	0	0	0	22	\$46,299
Physical therapy	344	0	0	0	344	\$111,033
Physicians Fees	0	0	1	9	10	\$1,180
Podiatry	7	0	0	0	7	\$1,957
Sports Medicine	2	0	0	2	4	\$1,130
Urgent Care Center	31	0	0	0	31	\$5,305
<b>Grand Total</b>	<b>495</b>	<b>3</b>	<b>24</b>	<b>82</b>	<b>604</b>	<b>\$508,778</b>



**Atlantic County Municipal JIF  
PPO Savings Report  
1/1/2024 - 3/31/2024**

	Bill Count	Provider Charges	Repriced Amount	\$ Savings	% Savings
Negotiated	7	\$19,118	\$10,524	\$8,594	45%
Out Of Network	44	\$42,059	\$36,038	\$6,021	14%
QualCare PPO	1575	\$2,211,283	\$611,846	\$1,599,437	72%
<b>Grand Total</b>	<b>1626</b>	<b>\$2,272,460</b>	<b>\$658,408</b>	<b>\$1,614,052</b>	<b>71%</b>

	QualCare PPO	EPO	Negotiated	Out Of Network	Grand Total	\$ Savings
Ambulance	0	1	0	5	6	\$1,074
Ambulatory Surgical Center	44	0	0	0	44	\$378,466
Anesthesiology	31	0	0	1	32	\$38,203
Behavioral Health	0	10	5	7	22	\$3,935
Durable Medical Equipment	0	11	0	10	21	\$5,015
Emergency Medicine	1	0	0	17	18	\$308
Hospital	40	0	0	0	40	\$109,401
Medical Transportation	0	2	0	0	2	\$278
MRI/Radiology	13	61	0	0	74	\$47,837
Neurology	0	2	0	0	2	\$1,926
Neurosurgery	0	30	0	0	30	\$26,629
Occupational Medicine	10	24	0	0	34	\$6,923
Optometrists	3	0	0	0	3	\$94
Orthopedic Surgery	6	200	1	1	208	\$472,878
Other	5	0	1	1	7	\$10,871
Pain Management	1	8	0	0	9	\$7,265
Physical Medicine & Rehab	0	40	0	0	40	\$93,961
Physical therapy	1	918	0	0	919	\$318,017
Physicians Fees	17	0	0	2	19	\$44,368
Podiatry	0	17	0	0	17	\$10,227
Radiology	1	0	0	0	1	\$16
Sports Medicine	2	12	0	0	14	\$24,908
Urgent Care Center	0	64	0	0	64	\$11,452
<b>Grand Total</b>	<b>175</b>	<b>1400</b>	<b>7</b>	<b>44</b>	<b>1626</b>	<b>\$1,614,052</b>

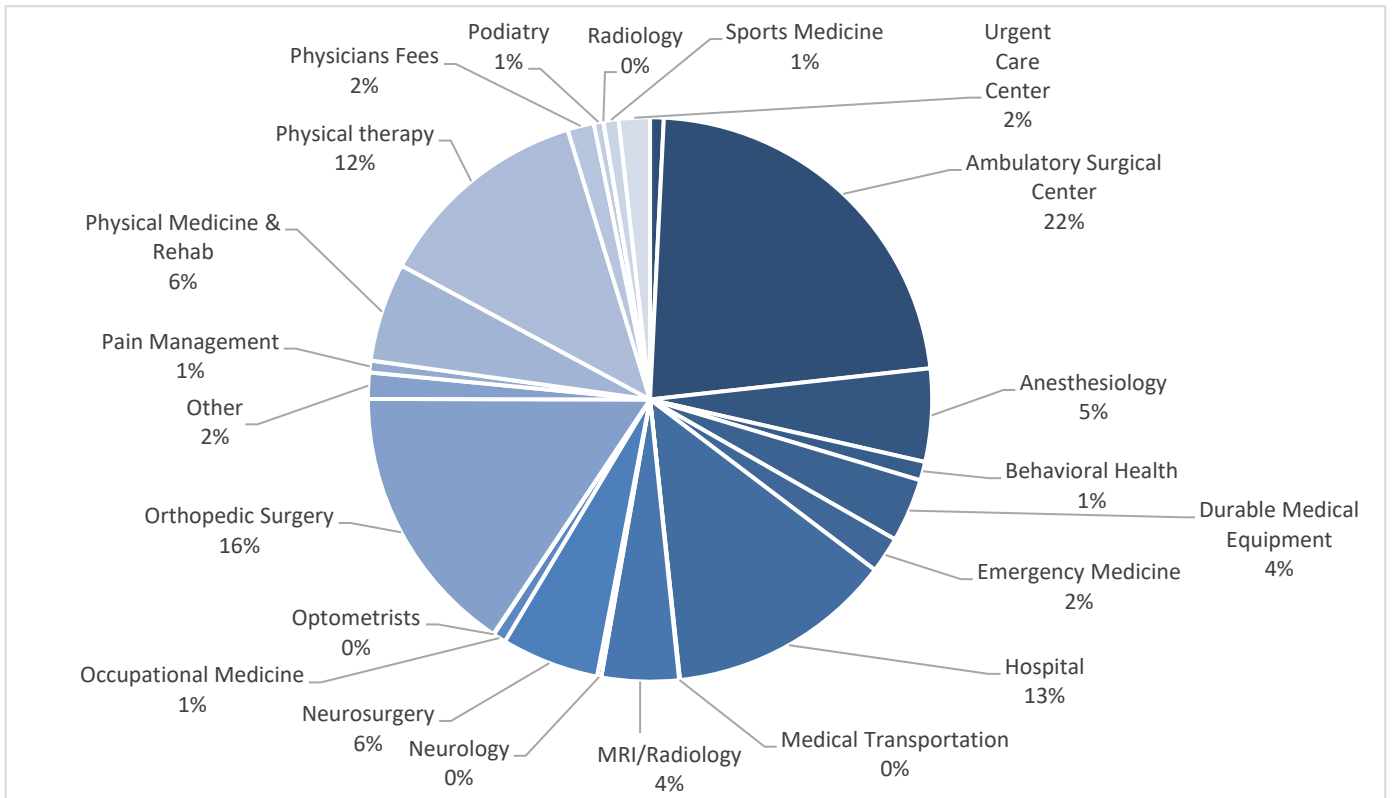


**Atlantic County Municipal JIF  
Top 10 Providers And Paid Provider By Specialty  
1/1/2024 - 3/31/2024**

**Top 10 Providers**

	<b>Repriced Amount</b>
JERSEY SHORE AMBULATORY SURGICAL CENTER	\$68,542
ORTHONJ, LLC	\$43,203
SOUTH JERSEY REHAB & SPINE INC	\$36,987
PREMIER ORTHOPAEDIC & SPORTS MEDICINE ASSOCIATES OF SNJ LLC	\$33,171
FERNANDO J. DELASOTTA MD	\$32,990
ATLANTICARE REGIONAL MEDICAL CENTER	\$28,429
CAPE REGIONAL MEDICAL CENTER	\$27,800
ONE CALL CARE DIAGNOSTICS	\$27,421
STRIVE PHYSICAL THERAPY SPECIALISTS LLC	\$24,510
ORTHO NJ, LLC	\$22,438
<b>Grand Total</b>	<b>\$345,492</b>

**Paid Provider By Specialty**





## Managed Care Quick Notes

### Functional Capacity Evaluations

An FCE is an objective, comprehensive, performance-based assessment that determines an employee's functional ability to perform essential duties in the workplace or activities of daily living and leisure. This evaluation assesses an individual's physical ability relative to a specific injury or illness. An FCE is an important tool to determine functional levels for a safe return-to-work following an injury. The examiner uses scientific methods to determine the validity of the test based on the employee's effort level which is noted in the report.

#### Components of an FCE:

- Patient's self-described level of pain and disability obtained by answering a few questions
- Detailed medical history
- Examination of musculoskeletal system
- Material handling tests to evaluate ability to lift, carry, push, and pull
- Movement tests to evaluate ability to walk, reach, climb, and level of dexterity
- Positional tolerance tests to evaluate ability to stand and sit
- Evaluation of aerobic capacity
- Material, movement, or positional tests customized to the patient's industry
- Analysis of information including patients' level of effort
- Report that draws conclusions about the patient's abilities based on the above evaluations

An FCE can be used to determine the physical capability of a potential employee, an employee returning to work after an illness or injury outside of work, or an employee who appears to be demonstrating difficulties in performing duties. Your Labor Attorney should be consulted in these situations.



**DATE:** April 05, 2024

**TO:** The Members of the Executive Board of the Atlantic County Municipal JIF

**FROM:** Christopher J. Winter L/E Risk Management Consultant

**RE:** ACM Activities (March)

**1. Policy/Procedures:** Policy and Procedure requests have been received and will be forwarded to requesting agencies that will contain current L/E best practices, NJ AG Guideline, NJ Police Licensing revisions and L/E Accreditation requirements.

**2. Agency Visits:**

Linwood PD                      Accreditation, agency updates and Police Licensing.

North Wildwood PD      Accreditation, agency updates and Police Licensing  
(Chief John Stevenson retired. The new Chief is Kathleen Madden).

Wildwood Crest PD      Accreditation, agency updates and Police Licensing.

Additional agencies continue to be scheduled.

- Consultative Visits were provided to identify and discuss agency concerns, training, policy and procedures, trends and requests. L/E RMC services were outlined and provided to Chiefs and Command members present. Police agency's with Command changes were a priority and visited as well. Additional agency visits are being scheduled at this time to continue to build relationships with the Law Enforcement agencies within the ACM JIF.

**3. Training:** No training scheduled at this time, however training topics are being considered for future training dates. Additionally, a course is being discussed and reviewed to assist agency Resiliency Officers, to be conducted by Dr. Kelly, Ph.D., ABPP. and Captain William Walsh, Voorhees PD.

**4. Law Enforcement Bulletins / Newsletters:** No bulletin posted this month.

**5. ACM JIF Law Enforcement Committee:** A L/E Committee is being formulated with three (3) Police Chiefs from each county to represent (JIF) police agencies in Atlantic and Cape May County. I plan to meet with them on a quarterly basis virtually to discuss trends, concerns, training, policy and procedure assistance, potential risk and liability issues and L/E Accreditation guidance etc. This is being developed to maintain an ongoing forum throughout the year as an extension of the County Chiefs Associations, to identify areas as previously mentioned and to reduce potential risks. An initial meeting was conducted on March 26, 2024.

- a) Police licensing was discussed in regards to the progress of agency policy revisions. A brief discussion revealed the unknown by the New Jersey Police Training Commission (PTC) and frustration by Chiefs pertaining to the state portal, continuing education and forms that are supposed to be in order for agencies to use.
- b) Pre Employment is an ongoing process for agencies based on retirements and / or promotions thereby requiring officer replacement. Difficulty with finding candidates or getting candidates that can meet the qualifications required.
- c) JIF services were discussed. Not all police agencies have been receiving info related to Wellness, Qual Lynx and Cyber Security. I advised the Chiefs that I would be forwarding documents to them as I receive them etc.
- d) Positive responses were obtained regarding my services and assistance to agencies.

**6. Meetings Attended:**

ACM Executive Claim Meeting	03/14/2024
ACM Executive Meeting	03/20/2024
ACM L/E Comm Mtg	03/26/2024



## Questions about employment issues? Call the New MEL Employment Practices Helpline

The MEL Safety Institute is pleased to announce the establishment of a NEW MEL Employment Practices Helpline (EPL), a dedicated resource to guide members on employment related issues.

The MEL EPL Helpline is staffed by attorneys that specialize in New Jersey employment law and understand the MEL JIF system. The three law firms staffing the EPL Helpline are affiliated with local Joint Insurance Funds (JIFs).

**Who can use the EPL Helpline?** MEL member municipalities will select and approve two individuals to use the helpline.

**What hours is the EPL Helpline available?** The helpline will be staffed during normal business hours, 9 a.m. – 5 p.m. Voicemail can be left afterhours for a callback.

**What kinds of issues can be addressed?** Any employment related topics or policies and procedures related to issues such as:

- Hiring
- Termination
- Harassment
- Discrimination
- Promotion/Demotion
- And more...

**What are the MEL EPL Helpline numbers?** MEL members can choose to call any of the MEL EPL Helpline firms listed below.

**MEL EPL HELPLINE:  
732-583-7474**

Jodi Howlett  
Cleary Giacobbe Alfieri Jacobs LLC  
955 State Route 34, Suite 200  
Matawan, NJ 07747955

**MEL EPL HELPLINE:  
609-522-5599**

David S. DeWeese  
The DeWeese Law Firm  
3200 Pacific Avenue  
Wildwood, New Jersey 08260

**MEL EPL HELPLINE:  
973-334-1900**

Fred Semrau  
Dorsey & Semrau  
714 Main Street  
Boonton, NJ 07005

**What happens after the call?** The attorney will provide the member with transcript of the call that includes recommendations. If the issue is beyond the scope of the MEL EPL Helpline the attorney will provide direction to the member on where to get appropriate assistance. All calls are confidential.





**MEL EPL Helpline  
Authorized Contact Person(s)**

TOWN	AUTHORIZED CONTACT PERSON	ADDITIONAL CONTACT PERSON(S)
Absecon City	Jessica Thompson	N/A
Avalon Borough	Scott Wahl	James Waldron
Brigantine City	Mollye O'Neill	Tige Platt
Buena Borough	Joseph Baruffi	Maryann Coraluzzo
Cape May City	Paul Dietrich, City Mgr.	Erin Burke, Clerk
Cape May Point Borough	Ed Grant	Elaine Wallace
Commercial Township	Heather Sparks (Miller)	Pam Humphries
Deerfield Township	Dawn Marie Bascelli	Karen Seifrit
Dennis Township	Jessica Bishop, CFO	Jacqueline Justice
Downe Township	Rebecca Bertram	N/A
Estell Manor City	Lisa Marcolongo, Clerk	Nelson Dilg
Folsom Borough	Patricia Gatto	Glenn Smith, Mayor
Galloway Township	Christian Johansen	Cyndi Spinelli
Hamilton Township	Christine Wilsen	N/A
Linwood City	Leigh Ann Napoli, Clerk	N/A
Longport Borough	A. Scott Porter	Jenna Kelly/CFO
Lower Township	Mike Laffey	Julie Picard, Clerk
Margate City	Johanna Casey	Dan Adams
Middle Township	Varvara Keun	Suzanne Schumann
Millville City	N/A	Pam Shaprio
Mullica Township	Ralph Condo	Dawn Stollenwerk, CFO
Newfield Borough	Charles Grova Jr.	Toni Van Camp, Clerk/Administrator
Northfield City	Mary Canesi	Dawn Stollenwerk, CFO
North Wildwood City	Jennifer VanSant	Nicholas Long
Ocean City	Elizabeth Woods, HR Dir.	N/A
Pleasantville City	Linda Peyton, Administrator	James Williams, Chief
Sea Isle City	George Savastano, Administrator	Kellie Seib
Somers Point City	Jason Frost	Lucy Samuelson
Stone Harbor Borough	N/A	N/A
Upper Deerfield Township	Roy Spoltore, Clerk	Amy Colaneri
Upper Township	Rhonda Sharp	Gary DeMarzo

**Atlantic County Municipal Joint Insurance Fund**

P.O. Box 488, Marlton, New Jersey 08053 · P: 856-446-9100 · F: 856-446-9149 · [www.acmjif.org](http://www.acmjif.org)





**MEL EPL Helpline  
Authorized Contact Person(s)**

TOWN	AUTHORIZED CONTACT PERSON	ADDITIONAL CONTACT PERSON(S)
Ventnor City	Lisa Hand	Tom Ciccarone
Waterford Township	Thomas Giangliulo, Jr., Mayor	Michael Dougherty
West Cape May Borough	Lauren Vitelli	Theresa Enteado
West Wildwood Borough	Donna Frederick, Clerk	Carl O'Hala
Weymouth Township	Dorothy-Jo Ayres	Kenneth Haeser
Wildwood City	Hope Pinto	Lisa Brown
Wildwood Crest Borough	Connie Mahon	Francine Springer
Woodbine Borough	Alex Bauer	William Pikolycky

**Atlantic County Municipal Joint Insurance Fund**

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**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND  
RESOLUTION #2024-\_\_\_\_\_**

**A RESOLUTION ADOPTING THE REVISED ACMJIF LITIGATION MANAGEMENT  
GUIDELINES.**

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund has been organized pursuant to *N.J.S.A. 40A:10-36 et. seq.*; and

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund (ACMJIF) is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Fund Commissioners of the Atlantic County Municipal Joint Insurance Fund have determined that the ACMJIF is distinguished from commercial insurance providers by virtue of the fact that it is formed by municipalities, it is funded by public monies appropriated by the member municipalities, it serves a public purpose and is responsible for the discharge of its function in a manner consistent with policies applicable to municipal government; and

**WHEREAS**, upon the recommendation of the Fund Solicitor and the Claims Review Committee, the Fund Commissioners of the Atlantic County Municipal Joint Insurance Fund have determined that it is appropriate to adopt the revised ACMJIF Litigation Management Guidelines; and

**WHEREAS**, the Fund Solicitor has previously provided a draft of these revised Litigation Management Guidelines to the Claims Review Committee of the ACMJIF for their review and approval, and the Claims Review Committee of the ACMJIF has recommended the adoption of these revised Guidelines by the Fund Commissioners, a copy of which are attached hereto; and

**WHEREAS**, the Commissioners of the Atlantic County Municipal Joint Insurance Fund have deemed it appropriate to adopt these revised ACMJIF Litigation Management Guidelines.

**NOW THEREFORE BE IT RESOLVED**, by the Commissioners of the Atlantic County Municipal Joint Insurance Fund, assembled at a public session April 17, 2024, that:

1. The Litigation Management Guidelines which are attached hereto are hereby adopted as the Litigation Management Guidelines of the Atlantic County Municipal Joint Insurance Fund.

**BE IT FURTHER RESOLVED** that copies of this Resolution shall be provided to the Executive Director, Fund Solicitor, Claims Administrator and all Assigned Defense Counsel and Approved Associates of the ACMJIF Defense Panel for their information and attention.

This Resolution was duly adopted by the Atlantic County Municipal Joint Insurance Fund at a public meeting held on April 17, 2024.

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

Attest: \_\_\_\_\_  
Secretary

By: \_\_\_\_\_  
Chairperson

Date: April 17, 2024

# LITIGATION MANAGEMENT GUIDELINES



**ATLANTIC COUNTY  
MUNICIPAL JOINT INSURANCE FUND**

## PREFACE

Since the inception of the Atlantic County Municipal Joint Insurance Fund (ACMJIF) in 1987, the number of Member Municipalities in the ACMJIF has grown from seven (7) Municipalities to the current number of thirty-nine (39) Municipalities in 2024.

The Municipal Joint Insurance Fund concept has continued to be very successful throughout the State of New Jersey, and the operation of these Funds has resulted in millions of dollars of monetary savings to not only the Member Municipalities but also the taxpayers of these Municipalities. The ACMJIF's proactive, effective and efficient handling and management of the claims on behalf of its Member Municipalities has produced and continues to produce outstanding results.

The adoption of an aggressive and consistent Litigation Management Philosophy by the Fund has been very effective in discouraging Plaintiffs' Attorneys and potential Plaintiffs from asserting claims against the Member Municipalities and their Employees. In addition, the philosophy adopted by the Fund has resulted in a significant reduction in the number of claims received, filed and paid. Immediately upon the receipt of notice of a potential claim, the Claims Administrator and the Fund Solicitor each perform extensive investigations and attempt to identify and establish defenses. Thereafter, once the litigation has commenced, the Fund Solicitor, Assigned Defense Counsel (ADC) and the Claims Administrator (CAS) identify the cases in which the Member Municipality has strong liability defenses, and the Fund determines that those cases will be aggressively defended. In those cases, ADC is directed to serve the Plaintiff's Attorneys with frivolous lawsuit notices (*R. 1:4-8*), and file Motions to Dismiss prior to filing responsive pleadings. If those strategies are unsuccessful, upon the completion of discovery, ADC is directed to file Motions for Summary Judgment. These strategies are effectively utilized to obtain the dismissal of these cases at the earliest stages possible. Our Litigation Philosophy is that the concept of settling a case, which the Fund has determined has strong liability defenses, for the cost of litigation is rarely an option. This philosophy has been very successful in sending the message to the potential Plaintiffs and to the Plaintiffs' Attorneys that settlement monies will not be paid on cases where there are strong liability defenses available to the Member Municipality. This Litigation Philosophy has effectively discouraged the filing of claims against our Member Municipalities, and our goal is to continue that trend into the future. In 2005 the number of active litigation files for General Liability, Automobile Liability and Police Civil Rights cases was one hundred and seventy-nine (179) cases. In 2024 the number of active litigation files has been reduced to eighty-eight (88) cases. In those cases where the Fund Solicitor, ADC and the Claims Administrator have identified that the Member Municipality has liability issues, the Fund has endeavored to expeditiously attempt to settle the case reasonably, and if that is not possible, the Fund will engage Fund approved Mediators to assist with the reasonable resolution of the case without incurring substantial legal expenses to defend the claim.

Our Fund Professionals (Fund Solicitor, ADC and Claims Administrator) each play very important roles in the successful litigation of claims; however, the ADC occupies the trenches, and the Fund and the Member Municipalities rely upon their representation and guidance for their ultimate successes in litigating the claims. Because of the importance of ADC's role, every three (3) years, the Fund advertises, through Requests for Qualifications (RFQs), the position of ADC for the Fund, and in response to that RFQ, the Fund receives numerous proposals from the best Insurance Defense Firms in South Jersey to serve as ADCs for the Fund. The Fund thoroughly reviews and evaluates each of these proposals in order to determine which firms and attorneys shall be awarded Contracts to serve as the ADC for the Fund. The Fund is fortunate to have the best and the brightest defense attorneys in South Jersey defending cases on behalf of our Member Municipalities and their employees.

The Fund has determined that one of the key components in the effective and efficient defense of claims is for our Fund Professionals to actively engage in regular communications regarding the handling of the claims. The Fund Solicitor conducts annual meetings with ADC and their Approved Associates, and annual meetings with the Supervisors and Adjusters from the Claims Administrator's Office to review and discuss current claims, trends and legal issues; to review and discuss the performance of the Litigation Management Team; to identify and address any communication issues and/or claims handling issues; and to improve the overall performance of the Fund Professionals in the handling and administration of the claims. In addition to the daily communications and meetings, these Litigation Management Guidelines are intended to be an invaluable tool to insure the efficient, effective and consistent management of all of our claims.

It is essential that each of the Contracted ADC and their Approved Associates review these Litigation Management Guidelines regularly, and that they have their support staff also regularly familiarize themselves with these Guidelines to ensure compliance in the best interest of the Fund and the Member Municipalities.

As always, it is the goal of all of the Fund Professionals to continue to work together as a team in the aggressive, effective and efficient management of litigated matters on behalf of the Member Municipalities and their employees and elected officials.

David S. DeWeese, Esquire  
Fund Solicitor, ACMJIF

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# ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND

## LITIGATION MANAGEMENT GUIDELINES

### I. INTRODUCTION.

The purpose of these Litigation Management Guidelines is to emphasize, delineate and support the ACMJIF's Litigation Management Philosophy, to specifically describe the roles and relationships of the Fund Professionals, the Member Municipalities and their employees and elected officials to the litigation process and to supplement the ACMJIF Bylaws, Plan of Risk Management and other policies established by the Fund's Executive Committee.

The Fund recognizes that the total cost of defending, administering, managing and resolving litigated claims can be very expensive, and therefore, through the RFQ process, the Fund has been providing, and is determined to continue to provide, quality ADC, at very reasonable hourly rates, as an essential part of our Litigation Management program. In order to ensure high quality representation together with controlling the costs of litigation, the Fund has established and adopted these Litigation Management Guidelines which will serve the best interests of the Member Municipalities, the Fund Professionals (Fund Solicitor, ADC and Claims Administrator) and the Fund. These Litigation Management Guidelines will provide the Fund Professionals (Fund Solicitor, ADC and Claims Administrator) and the Member Municipalities with guidance as to the roles, duties and responsibilities of the Litigation Management Team throughout the process of defending claims and litigation. The Fund firmly believes that the establishment of these Litigation Management Guidelines is essential to providing the framework for our Litigation Team to successfully defend claims and for the continued success of the Fund.

The Fund is confident that outstanding, effective and efficient claims and litigation defense will be provided for our Member Municipalities when the Litigation Management Team combines all of their skills and resources and effectively communicate with one another from the inception of a claim through the ultimate disposition of the claim. It is imperative that every expense incurred during the claims and litigation process is determined to be reasonable, necessary and required to effectively and efficiently defend and resolve each and every claim. Our "loss experience" is comprised of two factors: loss and expense. It is our goal to control both of these factors while still adhering to our Litigation Management Philosophy. Therefore, a collaborative effort by the Litigation Management Team in the claims management and litigation management process is essential to accomplishing this goal. Jointly, the Team shall endeavor to identify and clarify all pertinent issues at the earliest possible stage of a claim. Thereafter, once the litigation strategy has been established, it is imperative that this "Team" shall immediately proceed toward an expeditious, efficient, cost effective and just disposition of a claim. Disposition of a claim at the earliest possible date is highly desirable, and is in the best interest of our Member Municipalities.

## **II. ROLE OF CLAIMS ADMINISTRATOR.**

The Claims Administrator (CAS) for the ACMJIF is an integral member of the Litigation Management Team. The CAS and their staff are the Claims Manager for the Fund, and they are charged with the responsibility of the initial investigation, management and handling of claims prior to litigation being filed. In addition, they are charged with the responsibility of vigilantly and proactively anticipating and initiating all reasonable action necessary to investigate the claims and control the claims and its cost for the Fund and its Member Municipalities. It is for these reasons that the CAS will always retain primary responsibility for the management of a claim from its inception through final disposition. The CAS will work closely with our Fund Solicitor and the ADC, and they will continually monitor all assignments; provide input to the Fund Solicitor and ADC regarding the litigation strategies; prepare all Payment Authority Requests (PARs) for submission to the Claims Review Committee; participate in Mediations and Arbitrations; and upon the conclusion of a claim, provide the Member Municipalities with a copy of the Complaint, Court Order Dismissing the case (if applicable) and any Settlement Agreement and/or Release and Settlement Check (if applicable).

Upon the receipt of a claim, the CAS shall be responsible to immediately and thoroughly investigate the claim and determine the appropriate coverages for the claim under the ACMJIF policies of insurance. The CAS shall issue coverage letters to Member Municipalities within ten (10) days of their receipt of the claim explaining the coverage determination for matters under the General Liability Policy (GL), the Automobile Liability Policy (AL), the Police Civil Rights matters under the GL Policy, the Property Damage Policy (PD) and the Employment Practices Liability and Public Officials Liability Policy (EPL/POL). If the claim may be covered under the EPL/POL Policy, the CAS shall also, within ten (10) days of their receipt of the claim, provide notice of the claim to the Claims Administrator for the EPL/POL Policy with copies to the Fund Solicitor for a coverage determination by the EPL/POL carrier. The Municipal Claims Coordinators for the respective Member Municipalities should be utilized by the CAS to obtain all required information and documentation in order to analyze and effectively prepare for the defense of the claim. The CAS should contact the Fund Solicitor for any assistance required in the investigation and evaluation of a claim. In addition, the CAS should consult with the Fund Solicitor regarding any potential pre-suit assignments to ADC. If a claim, on a file where suit has not been commenced, is being presented for Payment Authority Request (PAR) to the Claims Review Committee, the CAS shall, at least thirty (30) days prior to the Claims Review Committee Meeting and the presentation of the PAR, provide a copy of the file to the Fund Solicitor so that the Fund Solicitor can properly evaluate the claim and provide their legal opinion to the CAS prior to the presentation of the PAR to the Claims Review Committee. If the claim cannot be settled by the CAS, with the assistance of the Fund Solicitor, prior to suit, the CAS, upon the receipt of a filed Complaint, shall request that the Fund Solicitor assign a member of the ADC Panel to handle the defense of the Member Municipality and/or their employee(s) in the litigation. The assignment shall be communicated by the Fund Solicitor to ADC, in writing, with copies to the CAS and the Member Municipality and/or their employees who have been named as Defendants, and the Fund Solicitor shall provide the ADC with detailed instructions regarding the handling of the claim.



The CAS shall immediately provide ADC with a complete copy of their file, and thereafter, they shall assist the ADC in conducting any further investigation as is deemed necessary to evaluate the liability and damages exposure of the Member Municipality, and thereafter, based upon that liability and damages determination, the CAS and ADC with the Fund Solicitor shall develop a litigation strategy for the appropriate handling of the matter.

Prior to suit being filed, it is the CAS's responsibility to investigate, negotiate and settle claims in accordance with the maximum amount the "Certifying and Appointing Officer" may approve under the ACMJIF's Risk Management Plan. However, once suit is filed, all of the further investigation and negotiations will be coordinated by the ADC, in consultation with the Fund Solicitor and the CAS after receiving the required authority from the Claims Review Committee. The ADC shall keep the Adjuster, the Supervisor of the CAS and the Fund Solicitor apprised of the status of all settlement negotiations.

When a settlement cannot be negotiated or it is determined that the claim will be aggressively defended, the CAS shall work closely with the ADC to complete all Discovery and then prepare the matter for the filing of a Summary Judgment Motion as expeditiously as possible. For cases in which the potential damages are significant, the CAS shall provide detailed quarterly reports of such claims to the Executive Director's Office, the Fund Solicitor, the Fund Solicitor for the Municipal Excess Liability (MEL) and the Claims and Litigation Manager for the MEL in accordance with the established "Large Loss" reporting requirements as outlined in their Contract and as required by the MEL.

When there is a proposed settlement of a claim, the CAS and the ADC shall be certain to immediately inform the appropriate representatives of the Member Municipality (Fund Commissioner, Claims Coordinator, Municipal Administrator and/or Municipal Clerk and the Municipal Solicitor for the Municipality) of the proposed terms of the settlement prior to finalizing the settlement. In addition, at the conclusion of the matter, the Member Municipality shall be provided by the CAS with a copy of the Complaint, Court Order Dismissing the case (if applicable) and any Settlement Agreement and/or Release and Settlement Check (if applicable).

### III. ROLE OF ASSIGNED DEFENSE COUNSEL AND APPROVED ASSOCIATES.

The ACMJIF awards Contracts annually to ADC based upon an RFQ process that occurs every three (3) years. The ADC and their Approved Associates that are selected by the ACMJIF after the RFQ process are the only Attorneys permitted to represent the ACMJIF's Member Municipalities and /or employees, unless exceptional circumstances arise and the Fund Solicitor, with the approval of the Executive Committee of the ACMJIF, determines that other Attorneys are required to provide representation on a particular matter. Therefore, ADC shall only utilize the ADC and the Approved Associates that are designated in their Contract with the ACMJIF. If the contracted ADC, during the term of their Contract, desires to add additional ADC and/or Approved Associates to their Contract, ADC must submit the request to the Fund Solicitor together with the Resume of the individual or individuals being requested to be added. The Fund Solicitor shall review and evaluate the request, and if he determines that the request should be approved, he will present the request to the ACMJIF Claims Review Committee in the form of a draft of a Resolution for their recommendation to the ACMJIF Executive Committee. If the ACMJIF Claims Review Committee recommends the addition to the ADC's Contract, the ACMJIF Executive Committee shall vote on the Resolution, and if approved, the ADC and/or Approved Associate shall be added to the ADC's Contract.

The ADC who has been assigned to handle the litigation on behalf of a Member Municipality and/or its employee(s) owes the Member Municipality/employee the highest degree of care and good faith during his or her professional legal representation of that entity and/or individual. The Fund's contractual duty to provide a defense to the Member Municipality encompasses the expectation, by both the Member Municipality and the Fund, that ADC will use their best efforts to avoid or limit the liability of the Member Municipality, and to avoid or limit any assessment of damages against the Member Municipality. In all matters, the Fund expects that ADC will abide by the New Jersey's Rules of Professional Conduct and the ACMJIF's Conflict of Interest Policy (attached hereto), and that the ADC will diligently, effectively and efficiently provide zealous representation of the Member Municipality and/or employee.

Once ADC has been assigned to defend a claim, the Fund expects ADC to take a very aggressive approach in the handling of the case. If warranted, it is required that Motions to Dismiss and Motions for Summary Judgment are to be filed at the earliest date possible in the litigation. In cases where it is determined that the litigation is frivolous (for example, based upon a lack of jurisdiction or otherwise), ADC shall immediately provide notice to the Plaintiff's Attorney in accordance with R. 1:4-8. Likewise, if the filing of a Motion to Dismiss is deemed to be appropriate, it should be filed at the earliest date possible. It is imperative that Motions for Summary Judgment are filed immediately upon the expiration of the Discovery End Date (DED), if not sooner. Those Motions should assert all of the available and applicable Title 59 defenses and any and all other defenses that are available in each particular case. It should be clear that the aggressive, pro-active approach of our ADC toward the pursuit of the early dismissal of cases will be expected and required.

It is expected by the Fund that time entries for extensive legal research will not appear on billings/invoices/memos from either the ADC or an Approved Associate. The Fund Solicitor maintains a Brief and Opinions Bank containing effective briefs and judicial decisions dealing with commonly litigated issues. This Brief and Opinion Bank is accessible by all ADC and Approved Associates. These briefs and opinions, together with the vast experience of our ADC in the defense of municipalities, should eliminate and control any extensive legal research expenses. If legal research is determined to be required, ADC must obtain the prior approval from the Fund Solicitor to conduct the legal research, and ADC should be prepared to provide an accurate estimate for the time required to perform the research to the Fund Solicitor.

There are certain litigation expenses that require ADC to obtain the prior approval from the CAS and the Fund Solicitor. Those expenses include but are not limited to expert's fees, the expense and costs associated with depositions that take place outside of the State of New Jersey and investigator's fees and expenses. ADC must submit a request for the approval of these litigation expenses at least sixty (60) days prior to the date required for the expense to be incurred.

On all litigated matters and all pre-suit assignments, ADC shall submit to the CAS and the Fund Solicitor the following: initial summary and analysis of the file after reviewing pleadings and the CAS file, written summaries of all discovery (Interrogatories, Requests for Production of Documents, Requests for Admission and Depositions); written summaries of all medical records received; written summaries and analysis of all expert opinions and reports received; written summaries prior to and after all mediation sessions; written summaries prior to and after any Arbitration Hearing; written summaries of any judicial decisions on Motions and written summaries of all settlement recommendations and/or negotiations. The goal of ADC shall be to provide these summaries within ten (10) days of the occurrence of the event. In addition, ADC shall regularly review their litigation budget as contained in their Reports, and they shall revise the budget when it is determined to be necessary. Any budget revision shall be accompanied by a detailed explanation for the revision.

When it has been determined that there is a proposal that may cause a claim to be settled, it shall be the primary responsibility of ADC to inform the appropriate representatives of the Member Municipality (Fund Commissioner, Claims Coordinator, Municipal Administrator and/or Municipal Clerk and the Municipal Solicitor for the Municipality) of the terms of the proposed settlement prior to finalizing the settlement. In addition, the Member Municipality shall be provided with copies of all executed Settlement and/or Release documents. Finally, upon the disposition of the claim, other than by settlement, the ADC shall immediately communicate this disposition to the appropriate representatives of the Member Municipality, and thereafter provide them with copies of any and all Court Orders memorializing the disposition.

While the Contracts between the ACMJIF and ADC permit billing entries by Paralegals, the tasks billed by ADC's Paralegals shall be limited, and any clerical work which is performed by Paralegals shall not be billed.

Established procedures for the authorization of the delegation of litigation tasks by the ADC to Approved Associates have previously been adopted by the ACMJIF. Those procedures are incorporated into these Litigation Management Guidelines and they are set forth below, and they should be strictly adhered to by all ADC and Approved Associates.

**PROCEDURES FOR THE AUTHORIZED DELEGATION OF LITIGATION  
TASKS BY ASSIGNED DEFENSE COUNSEL**

- 1.) The Atlantic County Municipal Joint Insurance Fund (ACMJIF) shall, by Resolution, annually award Contracts to all the Assigned Defense Counsel (ADC) and their Approved Associates that are permitted to provide representation of the ACMJIF's Member Municipalities and/or their employees and/or their elected officials in accordance with the procedures set forth below.
- 2.) "Assigned Defense Counsel" shall be defined as very experienced and qualified defense attorneys who are partners in their Law Firms, and who have been approved after an RFQ process by a Resolution of the Executive Committee of the ACMJIF to be awarded a Contract to serve as ADC to provide representation to the Member Municipalities of the ACMJIF and/or their employees and/or their elected officials in General Liability, Automobile Liability, Police Civil Rights and Workers' Compensation matters.
- 3.) "Approved Associates" shall be defined as those individual attorneys, who are Associates of Assigned Defense Counsel's Law Firm, who are approved by a Resolution of the Executive Committee of the ACMJIF, and may be assigned by Assigned Defense Counsel to perform certain authorized litigation tasks as herein delineated.
- 4.) When the Fund Solicitor issues an Assignment Letter to ADC, he/she should thoroughly review the Complaint and any CAS file materials received, perform the appropriate in-house conflict of interest review, and, if it is determined that no conflict exists, ADC shall forward an executed Acceptance of Assignment to the Fund Solicitor, the Claims Administrator Supervisor and the Claims Administrator Adjuster assigned to the file.
- 5.) ADC shall initially determine whether a R. 1:4-8 Frivolous Lawsuit Notice should be issued and whether a Motion to Dismiss should be filed, and if so, ADC shall draft, serve and/or file the Notice and Motion. ADC shall prepare and completely review the Answer that is to be filed with the Court to ensure that the appropriate Answers, Separate Defenses, Crossclaims and Third Party Claims have been included. All Answers are to be executed by the ADC only. While Approved Associates may assist in the preparation of the first draft of the Answer, the Answer must be reviewed, approved and executed by ADC prior to being filed with the Court.
- 6.) Written Discovery requests and responses may be drafted by Approved Associates; however, the drafts must be reviewed, approved and executed by ADC.
- 7.) The forwarding of Subpoenas, legal research projects, compilation of medical records, appearances at Scheduling Conferences, and discovery motion practice may be handled by an Approved Associate under the supervision of ADC. All discovery motions must be reviewed, approved and executed by ADC.
- 8.) ADC shall attend all meetings with representatives of the Member Municipality, and Approved Associates who have performed work on the matter shall be permitted to also attend these meetings.

- 9.) The ADC must attend all Discovery Depositions of the Plaintiffs, representatives of the Member Municipalities, and all expert Depositions. With regard to Discovery Depositions of fact witnesses to the litigation, the ADC should make every effort to attend said Depositions; however, if the ADC is unable to attend (due to a Trial commitment or is otherwise unavailable), an Approved Associate may attend and handle those Depositions with the prior approval of the Fund Solicitor.
- 10.) All Briefs in support of Motions for Summary Judgment must be prepared and executed by ADC. While an Approved Associate may assist in the preparation of the Brief, the ADC shall be primarily responsible for the preparation, review and execution of all Briefs submitted to the Court.
- 11.) ADC shall attend all Oral Arguments on Motions for Summary Judgment. There shall be no exceptions. However, Approved Associates who have performed work on the matter shall be permitted to also attend oral arguments on the Motion.
- 12.) All Arbitration and Mediation Statements must be prepared and executed by the ADC, and all Arbitration Hearings and Mediation sessions must be attended by the ADC. However, Approved Associates who have performed work on the matter shall be permitted to also attend Mediation sessions and Arbitration Hearings.
- 13.) All Settlement Conferences must be attended by the ADC. However, Approved Associates who have performed work on the matter shall be permitted to also attend the Settlement Conferences.
- 14.) All *de bene esse* Depositions must be conducted by the ADC. However, Approved Associates who have performed work on the matter shall be permitted to also attend the Depositions.
- 15.) All Appearances, Hearings, and Conferences in Workers' Compensation Court must be attended by ADC unless there has been prior approval granted by the Fund Solicitor for an Approved Associate to cover the appearance. However, Approved Associates who have performed work on the matter shall be permitted to also attend all Workers' Compensation Court Hearings and Conferences.
- 16.) All Trials must be attended and conducted by the Assigned Defense Counsel. There shall be no exceptions. However, Approved Associates who have performed work on the matter shall be permitted to also all Trials.

#### **IV. FUND SOLICITOR.**

The Fund Solicitor shall have the exclusive responsibility for the selection and assignment of ADC to all claims and litigation matters subject to the provisions of the Bylaws of the Fund. The Fund Solicitor shall assign and designate ADC to the handling and defense of the Member Municipalities and/or their employees and/or their elected officials from the ADC who have entered into Contracts with the ACMJIF for that particular year and which have been annually approved by Resolution of the Executive Committee of the ACMJIF. The Fund Solicitor shall be responsible to monitor and evaluate the performance of all of the ADC and Approved Associates, and he or she shall provide the Claims Review Committee and the Executive Committee of the ACMJIF with an Annual Defense Panel Report, which analyzes the performance of the ADC and Approved Associates over the prior year. The Fund Solicitor shall actively participate and be involved in every claim and litigated matter on behalf of the ACMJIF and the Member Municipalities, and he or she shall also perform evaluations of: the liability and damages issues in each case; the litigation strategies to be employed by ADC; the settlement values of cases; and the negotiation of the settlement of all cases. The Fund Solicitor shall have the responsibility to assist the CAS in the pre-litigation investigation and evaluation of claims, and he or she shall also monitor the performance and billings of all ADC and Approved Associates, and shall generally supervise, monitor and assist in the management of all claims and litigated matters. The Fund Solicitor shall actively resolve all issues and disputes between the CAS and ADC so as to ensure the orderly implementation and maintenance of the policies and guidelines outlined herein. Whenever necessary, the Fund Solicitor shall act as the liaison between the Fund, ADC, CAS and the Member Municipalities and their employees and elected officials.

At least annually, the Fund Solicitor shall organize a meeting with all ADC and Approved Associates to review current legal trends, these Litigation Management Guidelines and the policies, procedures and guidelines of the Fund as they relate to the efficient and effective defense of claims. In addition, the Fund Solicitor shall meet periodically with representatives of the CAS to discuss and evaluate the performance of ADC and Approved Associates, provide updates in the law that affect the claims against the Fund's member municipalities, provide advice on the handling of specific claims, and discuss the litigation strategies of the Fund. Finally, the Fund Solicitor shall periodically review and update the Litigation Management Guidelines.

## **V. INTERACTION OF ALL PARTIES WITH THE GOAL OF PROMPT DISPOSITION.**

The effective and efficient disposition of claims is dependent upon the communication, cooperation and assistance between the Fund Professionals (Fund Solicitor, ADC and CAS) who comprise the “Litigation Management Team”. Each of these Fund Professionals shall be responsible for his or her designated assigned duties, responsibilities and tasks as delineated in these Litigation Management Guidelines, and it is essential that the Fund Professionals communicate and cooperate with one another in order to accomplish the effective, efficient and successful management of these claims.

The Fund Solicitor, ADC and the CAS each share the common goal of the prompt and effective disposition of all claims and any litigated matters. An exchange of ideas and opinions by the “Litigation Management Team” is not only encouraged, but is required, in order to not only properly identify and evaluate the liability and damages issues for each claim, but also outline the most effective claims management and litigation strategies available to defend the claim in the best interest of the Fund, the Member Municipalities and their employees and elected officials. The collaborative efforts of the Fund Solicitor, the ADC and the CAS, through regular communications, are necessary for effective and successful claims management.

Upon the assignment of a claim by the Fund Solicitor to ADC, the CAS and the Municipal Claims Coordinator for the Member Municipality shall immediately provide the ADC and the Fund Solicitor with all of the investigative documents and information gathered prior to the assignment of ADC in order to avoid the duplication of efforts by ADC. ADC should thereafter promptly advise and supply the Fund Solicitor and the CAS with all pertinent documents and information that he or she has obtained through their investigation of the claim. If additional investigation is determined to be required, the Fund Solicitor, the CAS, and the ADC shall collectively determine how the task will be accomplished most efficiently and who will accomplish the task. Regular communications must then continue between the members of the “Litigation Management Team” with a constant view toward the aggressive defense of the claim with the ultimate goal being the effective and timely disposition of the claim. The expeditious disposition of claims against the Fund is most often accomplished through the service of *R. 1:4-8* Notices, the filing of Motions to Dismiss and the filing of Motions for Summary Judgment. However, there are some claims, based upon the identification of liability issues and/or the presence of significant injuries, that the exploration of the settlement of the claim is the best course of action. In these cases, the goal is to attempt to settle the claim early in the litigation process which may require the assistance of a Mediator. The Fund has identified Mediators who are very effective in settling cases, and it is in the best interest of the Fund and the Member Municipalities to direct these types of cases to these Mediators. The primary responsibility for determining the appropriate settlement authority shall be with the Fund Solicitor after consultation with the ADC and the CAS and as recommended by the Claims Review Committee, for approval by the Executive Committee, subject to the provisions of the Bylaws of the Fund and the Risk Management Program. It shall be the responsibility of the “Litigation Management Team” to effectively communicate to the Claims Review Committee and the Executive Committee the reasons why a case should be settled together with their respective opinions regarding the fair settlement value of the case. It shall then be determined by the Team how to best handle the settlement negotiations with the Plaintiff’s Attorney.

As detailed previously in these Litigation Management Guidelines, if it is determined that there are liability issues and/or damages issues on a particular claim, and the Plaintiff's Attorney is not reasonable in his/her valuation of the claim, then the Mediation process shall be utilized. Through the collective efforts of the Fund Solicitor, ADC and the CAS, an appropriate Mediator shall be selected for each claim, and the matter shall proceed expeditiously with the goal being to dispose of the claim early in the litigation process prior to incurring substantial legal expenses.



## **VI. FEES, COSTS, AND EXPENSES.**

All ADC for the Fund have been chosen for their experience in aggressively defending municipalities, municipal employees and municipal elected officials in litigation, and for their vast knowledge of municipal law with emphasis on Title 59 and related issues. Therefore, it is expected that *pro-forma* briefs, motions, interrogatories, etc. should be billed accordingly. ADC is encouraged to utilize the Brief and Opinion Bank that has been established and maintained by the Fund Solicitor for the preparation of all briefs in support of Motions to Dismiss and Motion for Summary Judgment and Trial Briefs.

However, where a unique issue is involved and extraordinary research has been determined to be required, the ADC shall promptly notify the Fund Solicitor of their request and ADC shall provide the Fund Solicitor with a detailed explanation and justification for the request. The prior approval of the Fund Solicitor is required before incurring the expense and the ADC shall also provide an accurate estimate of the time that will be required to perform and complete the research. All conclusions, results and/or memoranda from the legal research should be submitted to the Fund Solicitor and CAS for their review.

On each claim, the ADC shall submit to the Fund Solicitor and the CAS the Quarterly Summary Invoices together with the Quarterly Litigation Report, and the ADC shall also simultaneously submit to the Fund Solicitor the “Confidential and Privileged Memo” containing all billing, itemized with detailed entries describing the work performed and delineating the time spent for each entry in one-tenth of an hour increments with no reference to the monetary value of the increments. The date, description of the services rendered, and identity of the persons providing such service must be provided for each entry. The Fund should not be billed by ADC for the preparation of any Reports required by these Litigation Management Guidelines. Appropriate documentation must be provided for all out-of-pocket costs and disbursements. Each Summary Invoice shall reflect the current period outstanding fees plus cumulative paid fees and expenses from the inception of the legal activities of the claim. The Fund Solicitor shall review all “Confidential and Privileged Memos” to determine the appropriateness of the entries and the time allocated to each entry. The Fund Solicitor shall direct any questions and/or issues with the Memo directly to ADC. Once the Fund Solicitor has approved the “Confidential and Privileged Memo”, he shall forward the Memo to the CAS for their subsequent review and approval. Any Billing Guidelines that are approved by the Fund shall be strictly adhered to by all ADC.

ADC shall not bill the Fund for office expenses such as postage, copies, mileage, tolls, legal research services, etc. If an extraordinary expense is anticipated, the ADC shall request the approval of the Fund Solicitor prior to incurring any such expense, and said approval shall only be provided in extraordinary circumstances.

## VII. REVIEW OF LEGAL SERVICES.

Occasionally, the Fund may audit and review the legal product of ADC. It is expected that ADC will cooperate with the Fund and make available all files requested for review.

The review will address the overall quality of the legal work performed including the following:

1. Services performed by ADC:
  - a. Was contact promptly made with the representatives of the member municipality and the CAS?
  - b. Did the ADC follow the initial instructions and guidelines set forth by the CAS and the Fund Solicitor?
  - c. Were responsive pleadings filed in a timely manner?
  - d. Did ADC report recommendations for defending the claim to the CAS and the Fund Solicitor in a timely manner?
  - e. Did ADC perform any research that required prior authorization, and did the Fund benefit from the research?
  - f. Did the ADC promptly perform and provide reports regarding all reasonable and necessary discovery?
  - g. Did ADC effectively communicate with all necessary parties at all stages of the litigation?
  - h. Did ADC aggressively move the case to a conclusion and was there a constant attempt to seek early disposition?
  - i. Did ADC submit required reports, billings and budgets on a complete and timely basis, and were these reports, billings and budgets accurate?
  - j. Did ADC promptly file the appropriate Motions to Change Venue, Dismiss the Complaint and or For Summary Judgment?
  - k. Did ADC effectively and timely communicate the disposition of the claim to the Member Municipality, and provide the Member Municipality with copies of all of the settlement documents?
2. The legal fees for the legal services rendered compared with the legal work performed:
  - a. Were the time and event entries contained in the “Confidential and Privileged” Memos in accordance with the Litigation Management Guidelines and were the time entries reasonable?
  - b. Were the time and event entries itemized to one-tenth of an hour?

- c. Were the time and event entries submitted quarterly in accordance with the Litigation management Guidelines?
- d. Were the time and event entries excessive for the work that was performed?
- e. Were the services performed and/or the legal fees charged commensurate with the complexity of the case assigned?
- f. Were the time and event entries for each task appropriate?
- g. Were the costs billed appropriately and did the ADC receive approval from the Fund Solicitor prior to incurring the costs?

## **VIII. CONCLUSION.**

The purpose of these Litigation Management Guidelines is to detail the expectations of the CAS, ADC, Approved Associates and the Fund Solicitor in the handling of claims on behalf of the Fund and the Member Municipalities. It has been determined that adherence to these Guidelines will result in the most efficient and effective handling and disposition of litigation, and will also produce a cost-effective benefit to the Member Municipalities of the Fund. The Fund firmly believes that an aggressive and consistent Litigation Management Philosophy that is consistently implemented by the Litigation Management Team, in accordance with these Litigation Management Guidelines, is in the best interest of the Fund and its Member Municipalities.

SAMPLE ASSIGNMENT LETTER

\_\_\_\_\_, 2024

Attorney  
Address

Re:

Dear \_\_\_\_\_:

Enclosed herewith please find a copy of a Summons and Complaint which have been filed in the above-captioned matter in the Superior Court of New Jersey, County of \_\_\_\_\_. I am assigning the defense of this matter to you on behalf of the Atlantic County Municipal Joint Insurance Fund (ACMJIF) member, \_\_\_\_\_.

This matter arises from the Plaintiff's allegations as contained in the Complaint that on

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Initially, I would request that you immediately make the appropriate investigation in your office to determine whether a conflict exists regarding this matter. Please advise Qual-Lynx, as well as my office, as soon as possible, if a conflict does, in fact, exist.

Please adhere to the Litigation Management Guidelines of the Atlantic County Municipal Joint Insurance Fund in the handling of this matter. In accordance with those Guidelines, the Initial Acceptance of Assignment should be returned immediately, the Thirty (30) Day Report will be due on \_\_\_\_\_, and the Sixty (60) Day Report will be due on \_\_\_\_\_.

The Qual-Lynx Claims Adjuster handling this matter is \_\_\_\_\_, and \_\_\_\_\_, Claim Supervisor, and I should be provided with copies of all reports regarding this matter.

All billings must be submitted quarterly, with the original bill going to the claims adjuster and copies to this office and the claims supervisor. The bills must be attached to the quarterly report as outlined in the Litigation Management Guidelines.

Be advised that all Independent Investigations, Independent Medical Examinations and Expert Witnesses which may be required in this matter are to be coordinated through the Claims Adjuster and Claims Supervisor from Qual Lynx.

Attorney  
Re:  
Date  
Page Two

Within five (5) to ten (10) days, you will be receiving a copy of the Qual Lynx file concerning this matter. If you have not received this information within said time period, please contact me immediately.

As I am sure you are aware, these General Liability matters are reviewed on a monthly basis by the Atlantic County Municipal Joint Insurance Fund Executive Committee. Therefore, any settlement authority in this matter must be approved by the Committee, which in some cases may take up to thirty (30) days.

Finally, be advised that the Municipal Claim Coordinator for \_\_\_\_\_ is \_\_\_\_\_, at \_\_\_\_\_. Any requests for information for answers to Interrogatories and the scheduling of Depositions should be arranged through said Municipal Claims Coordinator.

If you have any questions or need for additional information, please do not hesitate to contact me.

Very truly yours,  
***THE DEWEESE LAW FIRM, P.C.***

David S. DeWeese

DSD/b  
Enclosure

cc: \_\_\_\_\_, Executive Director, ACMJIF  
\_\_\_\_\_, Qual Lynx Account Manager  
\_\_\_\_\_, Qual Lynx Claim Supervisor  
\_\_\_\_\_, Claim Adjuster, Qual Lynx Associates  
\_\_\_\_\_, Fund Commissioner  
\_\_\_\_\_, Municipal Claim Coordinator

OUTLINE OF REPORTS TO BE SUBMITTED BY ASSIGNED DEFENSE COUNSEL TO THE  
CLAIMS ADMINISTRATOR AND THE FUND SOLICITOR

- I. Initial Acceptance of Assignment. To be returned immediately upon receipt of assignment. (Form)
- II. Thirty (30) Day Report. To be completed within thirty (30) days of the Assignment. (Form)
- III. Sixty (60) Day Report. This Report is identical to the Thirty (30) Day Report. The Thirty (30) Day Report should be copied and that portion which was not completed should be answered and any changes necessary should also be made to the form. All additions and/or revisions should be highlighted in “BOLD”. (Form)
- IV. Quarterly Report. These Reports are due at the end of every quarter subsequent to the filing of the Sixty (60) Day Report. The Report should indicate the status since the last report and the tasks that are anticipated to be completed in the next quarter. (Form)
- V. Discovery Completion Report. This Report is a narrative that is due within ten (10) days of the Discovery End Date. The items to be contained in this Report are as follows:
  - A. General statement of facts, with references to the relevant interrogatory answers and testimony at depositions;
  - B. Assessment of liability, with reference to Statutory Law and Case Law, if necessary;
  - C. Assessment of damages, with reference to the method of determination and a detailed description of the Plaintiff’s injuries and the Plaintiff’s current condition. If possible, the determination of damages should be broken down into the various components, such as pain and suffering, lost wages, loss of services, property damage, etc.
  - D. Assessment of the credibility of all parties and witnesses.
  - E. Recommendations of Assigned Defense Counsel. For example, is the case able to be settled? Should it be settled or should the case proceed to Arbitration or Mediation? Are there any Motions that should be filed, and if so, what type of Motion should be filed and when will it be filed? What is the likelihood of success on any Motion to be filed?
- VI. Pre-Arbitration/Pre-Mediation Report. This Report must be submitted at least fifteen (15) days prior to any scheduled Mediation and/or Arbitration. (Form)
- VII. Post-Arbitration/Post-Mediation Report. This report must be submitted within seven (7) days after the Mediation and/or Arbitration. This Report should not be a review of all of the facts of the case, but instead it should indicate who attended the session, Assigned Defense Counsel’s impressions of all individuals who were present, Assigned Defense Counsel’s evaluation of the Mediator or Arbitrators, the results of the Mediation/Arbitration, the rationale of the Arbitrators in arriving at their decision or the opinion of the Mediator as to the fair settlement value of the case, and Assigned Defense Counsel’s recommendations as to whether the case should be settled or whether the case should proceed to Trial. (Form)
- VIII. Pre-Trial Report. This Report must be submitted at least thirty (30) days prior to the scheduled date for Trial. (Form)

- IX. Miscellaneous Reports. The Assigned Defense Counsel should advise the Claims Administrator's staff and the Fund Solicitor when a significant event or change in Assigned Defense Counsel's analysis occurs during the course of the litigation. For example, if a witness suddenly appears who can have a determinative effect on liability or damages, or if facts are determined that might adversely impact the claim or the defense of any party, notice should be provided immediately. This Report should be communicated by way of correspondence. Additionally, the Claims Administrator's staff and the Fund Solicitor must immediately receive copies of all Motions filed by any party, the return dates of the same as well as the dates of all other scheduled appearances, such as Arbitration, Mediation, Oral Argument, etc.
- X. Post-Litigation Analysis. To be submitted within ten (10) working days of the completion of the litigation, whether the case was settled, dismissed, or tried to a verdict. (Form)

*Please note that the original of all reports, along with any enclosures, is to be forwarded to the Claims Adjuster assigned to the claim. A copy of the Reports, with copies of enclosures, must be emailed to the Fund Solicitor, and a copy of the Reports only is to be emailed to the Claims Supervisor. The Claim Administrator's staff and the Fund Solicitor should receive copies of all pleadings.*



**INITIAL ACCEPTANCE OF ASSIGNMENT**

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

**ASSIGNED DEFENSE COUNSEL INITIALLY ASSIGNED TO HANDLE THIS MATTER:** \_\_\_\_\_

**TO THE ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND:**

I have been assigned the above captioned matter to defend the litigation on behalf of \_\_\_\_\_ . Our Law Firm hereby makes the following representations to the Atlantic County Municipal Joint Insurance Fund:

1. Assigned Defense Counsel who shall be responsible for this file is:  
\_\_\_\_\_
2. The Approved Associate(s) who will also perform work on this file is (are):  
\_\_\_\_\_
3. The Assigned Defense Counsel, the Approved Associate(s) and this law firm have the experience and requisite ability necessary to handle this matter.
4. The Assigned Defense Counsel, the Approved Associate(s) and this law firm will have the time available to properly represent the member municipality and/or its employee(s), including the preparation for and attendance at all depositions, hearings, and trial.
5. The Assigned Defense Counsel, the Approved Associate(s) and this law firm will comply with the Atlantic County Municipal Joint Insurance Fund’s Litigation Management Guidelines and all of the policies and procedures relating to litigation (including billing procedures).
6. The Assigned Defense Counsel, Approved Associate(s) and this law firm have no ethical or legal conflicts that would disqualify the firm or the attorney(s) from representing the defendants insured by the Atlantic County Municipal Joint Insurance Fund in the pending litigation.

Law Firm: \_\_\_\_\_

BY: \_\_\_\_\_  
Esquire

Date: \_\_\_\_\_

Original: Claims Adjuster \_\_\_\_\_ (with enclosures)

cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)

Claims Supervisor: \_\_\_\_\_ (without enclosures)

\_\_\_\_\_ 30 Day Report (Due \_\_\_\_\_)

\_\_\_\_\_ 60 Day Report (Due \_\_\_\_\_)

**DEFENSE ATTORNEY'S SUIT STATUS REPORT**

THE COMPLETED THIRTY-DAY REPORT SHOULD BE COPIED  
AND USED AS THE BASIS FOR THE SIXTY-DAY REPORT.

(Attach extra sheets, if necessary)

**DATE OF REPORT:** \_\_\_\_\_

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

**A. GENERAL INFORMATION**

A. 1. PLAINTIFF

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Marital Status: \_\_\_\_\_

No. of Dependents: \_\_\_\_\_

A. 2. CO-DEFENDANT(S)

A. 3. THIRD PARTY DEFENDANT (S)

A. 4. Have you received the contents of the file from Qual Lynx?

Yes \_\_\_\_\_ No \_\_\_\_\_

A. 5. Does the file contain all information and/or documentation necessary to evaluate the liability and damages issues in this case?

Yes \_\_\_\_\_ No \_\_\_\_\_

If not, what information and documentation is required?

**B. LITIGATION INFORMATION**

B. 1. Court:

Venue:

Jury Trial: Yes \_\_\_\_\_ No \_\_\_\_\_

Bifurcation: Yes \_\_\_\_\_ No \_\_\_\_\_

B. 2. Designated Trial Counsel:

This Defendant: \_\_\_\_\_

Co-Defendant(s): \_\_\_\_\_

Plaintiff: \_\_\_\_\_

Third Party Defendant(s): \_\_\_\_\_

Plaintiff's Attorney's Experience: \_\_\_\_\_

B. 3. Date Complaint Filed: \_\_\_\_\_

Date Answer Filed: \_\_\_\_\_

Date Crossclaim Filed: \_\_\_\_\_

Date Third Party Claim Filed: \_\_\_\_\_

Names of Third-Party Defendant (s): \_\_\_\_\_

Frivolous Lawsuit Notice (R. 1:4-8) to Plaintiff's Attorney: \_\_\_\_\_

B. 4. Plaintiff's Cause(s) of Action (Negligence, wrongful death, civil rights, property damage, etc.):

\_\_\_\_\_

\_\_\_\_\_

B. 5. Interrogatories Propounded Yes \_\_\_\_\_ No \_\_\_\_\_

Date(s): \_\_\_\_\_

Date Answers to Interrogatories propounded by this Party are due:

Plaintiff: \_\_\_\_\_

Co-Defendants \_\_\_\_\_

Third Party Defendant(s) \_\_\_\_\_

Parties upon whom Interrogatories were propounded:

\_\_\_\_\_

\_\_\_\_\_

B. 6. Depositions Scheduled: Yes \_\_\_\_\_ No \_\_\_\_\_

Date(s): \_\_\_\_\_

Parties and Witnesses to be deposed: \_\_\_\_\_

\_\_\_\_\_

B. 7. Discovery End Date: \_\_\_\_\_

B. 8. Anticipated Trial Date: \_\_\_\_\_

B. 9. Plaintiff's Demand for Damages: (Pursuant to R.4:52)

\_\_\_\_\_

**C. PRELIMINARY LITIGATION STRATEGY**

C. 1. Should any party (ies) be added Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, state name(s) and what has been (will be) done to add said party(ies):

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C. 2. Is (Are) there any unknown party(ies)? Yes \_\_\_\_\_ No \_\_\_\_\_

Have they been appropriately noted at time Answer filed? Yes \_\_\_\_\_ No \_\_\_\_\_

Are any special investigative services required to determine identity? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: \_\_\_\_\_

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C. 3. Will any preliminary Motions be required?

(Venue, Jurisdiction, Motion to Dismiss, Title 59 defenses, Summary Judgment, etc.)?

State nature of Motion, factual basis for same, and return date or anticipated return date \_\_\_\_\_

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C. 4. Besides the standard negligence defenses, have any special defenses been asserted (e.g., Title 59 defenses)? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, state the nature of the defense and factual basis for same. \_\_\_\_\_

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C. 5. Do you suggest any additional investigation? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, explain in further detail: \_\_\_\_\_

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C. 6. Are any Motions by any party (including this Defendant) to be anticipated at the completion of discovery? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, set forth nature of Motion and basis for same.

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When do you anticipate that these Motions will be filed?

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C. 7. Do you anticipate the need for any type of expert witnesses on behalf of this Defendant? (e.g., independent medical examination, accident reconstruction, police professional, etc.)?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, explain in further detail:

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C. 8. Do you have any comments or suggestions regarding the preliminary litigation strategy?

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C. 9. Do you recommend that this matter be submitted to Mediation? If so, when would you anticipate that the Mediation Process would commence and who would you recommend as the Mediator?

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**D. DEFENSE ATTORNEY'S ASSESSMENT OF EXPOSURE**

D. 1. DAMAGES

- Pain and suffering:
- Lost Wages:
- Punitive:
- Property Damage:
- Per Quod:

D. 2. Medical Specials to date: \_\_\_\_\_

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D. 3. Liability as against this defendant: Yes \_\_\_ No \_\_\_

If Yes, give your assessment of percentage of liability of this defendant, co-defendants, third party defendants, and the plaintiff's contributory and/or comparative negligence and the factual basis for same:

If No, set forth the factual basis upon which you base this assessment: \_\_\_\_\_

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D. 4. For 60 Day Report Only:

Has your assessment of damages or liability changed since the initial assessment?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, explain: \_\_\_\_\_

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D. 5. Your assessment of the value of this case today:

30 Day Report \_\_\_\_\_

60 Day Report \_\_\_\_\_

D. 6. Recommended settlement offer today:

30 Day Report \_\_\_\_\_

60 Day Report \_\_\_\_\_

D. 7. BUDGET-Anticipated Legal Fees and Expenses-

Through completion of discovery: \_\_\_\_\_

Through completion of ESP/Arbitration: \_\_\_\_\_

Through trial: \_\_\_\_\_

Should the Initial Budget be revised, and if so, why: \_\_\_\_\_

D. 8. Have there been any settlement negotiations? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: \_\_\_\_\_

**MISCELLANEOUS COMMENTS BY DEFENSE ATTORNEY**

ASSIGNED DEFENSE COUNSEL

\_\_\_\_\_  
Defense Attorney (30-Day Report)

\_\_\_\_\_  
Defense Attorney (60-Day Report)

Original: Claims Administrator: \_\_\_\_\_ (with enclosures)

cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)

Claims Supervisor: \_\_\_\_\_ (without enclosures)

**QUARTERLY LITIGATION REPORT**

TO BE FILED BY THE END OF EACH CALENDAR QUARTER  
SUBSEQUENT TO THE SUBMISSION OF THE SIXTY (60) DAY REPORT  
(Attach extra sheets, if necessary)

**DATE OF REPORT:** \_\_\_\_\_

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

1. Date of last report submitted.
  
2. Have all interrogatories propounded on behalf of this Defendant been answered?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If No, set forth the name(s) of the party(ies) with overdue answers, when the answers were due, and what is being done to obtain answers:
  
3. Has discovery been completed?  
Yes \_\_\_\_\_ No \_\_\_\_\_
  
4. State, in narrative form, what has transpired since the submission of the last report.
  
5. What actions do you intend to take within the next calendar quarter in regard to this matter?
  
6. Have any settlement negotiations taken place since the submission of the last report?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
Explain:
  
7. Do you anticipate filing any Motions, such as a Motion to Dismiss or a Motion for Summary Judgment in this matter?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If so, when do you anticipate filing the Motion?  
\_\_\_\_\_
  
8. Are you recommending that this matter be submitted to Mediation?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If so, when will the matter be submitted to Mediation?  
\_\_\_\_\_



9. Has anything happened since the submission of your last report that would change your assessment of liability or damages or your litigation budget?

Yes \_\_\_\_\_ No \_\_\_\_\_

Explain:

10. Do you anticipate the need for any type of expert witness on behalf of this defendant (e.g. independent medical examination, accident reconstruction, police professional, etc.)?

Yes \_\_\_\_\_ No \_\_\_\_\_

Explain:

11. Miscellaneous comments of defense counsel:

12. Attach quarterly billing to this report.

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_

Esquire

Original: Claims Administrator: \_\_\_\_\_ (with enclosures)

cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)

Claims Supervisor: \_\_\_\_\_ (without enclosures)

PRE-ARBITRATION/PRE-MEDIATION REPORT

TO BE SUBMITTED AT LEAST FIFTEEN (15) WORKING DAYS  
BEFORE THE SCHEDULED ARBITRATION/MEDIATION  
(Attach extra sheets, if necessary)

**DATE OF REPORT:** \_\_\_\_\_

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

1. Scheduled Date of Arbitration/Mediation:
2. Is this matter ready to proceed to Arbitration/Mediation?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If No, set forth why:
3. Name of the Attorney who will be preparing the Arbitration/Mediation Memorandum and appearing at the Arbitration:  
If different from original attorney, state why:
4. If representatives/witnesses are to be present at the Arbitration/Mediation, have proper arrangements been made for their attendance, including the service of subpoenas?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If No, set forth why:
5. Have representatives of the Member Municipality received notice of the date for the Arbitration/Mediation?  
If so, who received notice?
6. Who will be appearing at the Arbitration/Mediation on behalf of the Member Municipality?
7. Attach copy of any Arbitration/Mediation Memorandum that you intend to submit to the Arbitrators/Mediator.
8. Miscellaneous comments of Assigned Defense Counsel:

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_

Original: Claims Administrator: \_\_\_\_\_ Esquire (with enclosures)  
cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)  
Claims Supervisor: \_\_\_\_\_ (without enclosures)

POST ARBITRATION/POST MEDIATION REPORT

TO BE SUBMITTED WITHIN FIVE (5) DAYS UPON COMPLETION  
OF ARBITRATION

(Attach extra sheets, if necessary)

**DATE OF REPORT:** \_\_\_\_\_

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

1. What was the assessment of liability placed on each of the parties by the Arbitrators?  
Describe their analysis of the liability issues:
  
2. Attach copy of the Report of Arbitration containing the decision of the Arbitrators.
  
3. What was the assessment of the Plaintiff's damages by the Arbitrators? Be certain to clarify whether the assessment of damages was for the full value of the Plaintiff's injuries or if the figure was simply the amount the Arbitrators determined the Plaintiff should receive.
  
4. Who attended the Arbitration on behalf of the Member Municipality?
  
5. What were the names of the Arbitrators?

Describe the experience of the Arbitrators, if known:

6. In your opinion, did the Arbitrators fully comprehend the factual and/or legal issues?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If answer is No, explain:
  
7. Does plaintiff's attorney indicate a willingness to settle this matter at the figure set forth by the Arbitrators?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If No, set forth what he would be willing to settle the case for and any reasoning he gave you therefor:

8. In your opinion, should the case be settled for the amount set forth by the Arbitrators?  
 Yes \_\_\_\_\_ No \_\_\_\_\_  
 Explain, with reference to your opinion as to whether or not the case should be settled, and the amount which you would propose to offer.
9. Should a Trial De Novo be requested and filed on behalf of the client?  
 Yes \_\_\_\_\_ No \_\_\_\_\_  
 Explain and indicate the date by which the Trial De Novo must be filed.
10. Were you satisfied with results of Arbitration?  
 Yes \_\_\_\_\_ No \_\_\_\_\_  
 Explain:
11. Did the results of the Arbitration change your assessment of this case?  
 Yes \_\_\_\_\_ No \_\_\_\_\_  
 Explain:
12. Additional comments by Assigned Defense Counsel:

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_  
 Esquire

Original: Claims Administrator: \_\_\_\_\_ (with enclosures)  
 cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)  
 Claims Supervisor: \_\_\_\_\_ (without enclosures)

**PLEASE ADJUST THE CONTENT OF THIS REPORT FOR MEDIATIONS.**

PRE-TRIAL REPORT

TO BE SUBMITTED AT LEAST THIRTY (30) DAYS  
PRIOR TO THE FIRST SCHEDULED DATE FOR TRIAL  
(Attach extra sheets, if necessary)

**DATE OF REPORT:** \_\_\_\_\_

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

1. Is this matter ready to proceed to trial?

Yes \_\_\_\_\_ No \_\_\_\_\_

If No, explain:

2. Scheduled Trial Date: \_\_\_\_\_ Name of Judge: \_\_\_\_\_

3. Have arrangements been made for all witnesses, including expert witnesses, to appear at the time of trial?

Yes \_\_\_\_\_ No \_\_\_\_\_

If No, explain:

Will there be any de bene esse depositions?

Of whom?

4. Will any requests be made for special jury instructions?

Yes \_\_\_\_\_ No \_\_\_\_\_

Explain: (If special request to be made, attached copies of same.)

Will you submit *voir dire* questions for the jury?

If so, please attach copies.

Have you prepared a Witness List?

If so, please attach a copy.

5. Should any attempt be made to settle this matter prior to trial?

Yes \_\_\_\_\_ No \_\_\_\_\_

Explain:

6. Will you submit *voir dire* questions for the jury? If so, please attach copies.

7. Have you prepared a witness list? If so, please attach a copy.
8. Should any additional attempts be made to settle this matter prior to trial? Explain.
9. Have representatives of the Member Municipality received notice of the trial date? If so, who received the notice?
10. As succinctly as possible, set forth your trial strategy.
11. What is your assessment of the probability of success if the matter proceeds to Trial?
12. Who (Assigned Defense Counsel) will be handling the Trial on behalf of the member?

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_  
Esquire

Original: Claims Administrator: \_\_\_\_\_ (with enclosures)  
 cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)  
 Claims Supervisor: \_\_\_\_\_ (without enclosures)

POST-LITIGATION ANALYSIS

TO BE SUBMITTED WITHIN TEN (10) DAYS  
OF COMPLETION OF LITIGATION  
(Attach extra sheets, if necessary)

**DATE OF REPORT:** \_\_\_\_\_

**CAPTION:** \_\_\_\_\_

**MEMBER MUNICIPALITY/EMPLOYEE:** \_\_\_\_\_

**QUAL LYNX CLAIM NO:** \_\_\_\_\_

**DATE OF LOSS:** \_\_\_\_\_

1. This case was concluded by:  
Settlement \_\_\_\_\_,  
Dismissal \_\_\_\_\_, or  
Jury Verdict \_\_\_\_\_.
2. Set forth the final terms resulting from the Settlement or Trial of this matter:
3. How did this result compare with your analysis of the case throughout Litigation?
4. Did this case conclude along the lines of the Arbitration/Mediation? Explain:
5. If tried to verdict, do you anticipate anyone, including this party, filing an appeal?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
Explain:
6. Did you receive proper cooperation from the Claims Administrator's office?  
Yes \_\_\_\_\_ No \_\_\_\_\_.  
Explain:
7. Do you have any recommendations how cooperation and communication between the Assigned Defense Counsel, the Fund Solicitor and the Claims Administrator' staff can be improved in the future?
8. Did you receive proper cooperation from the Fund Solicitor's office?  
Yes \_\_\_\_\_ No \_\_\_\_\_.  
Explain:

9. Do you have any recommendation as to how the relationship between the Assigned Defense Counsel and the Fund Solicitor can be improved in the future?
  
10. Were you satisfied with your and your firm's performance on behalf of the defendant in this matter?  
 Yes \_\_\_\_\_ No \_\_\_\_\_.  
 If No, explain:
  
11. Did you receive proper support services, such as investigation, from the Claims Administrator?  
 Yes \_\_\_\_\_ No \_\_\_\_\_.  
 If No, explain:
  
12. If any expert witnesses were utilized in representing this defendant, whether medical or non-Medical, please evaluate each expert witness in terms of knowledge, abilities, cooperation with the defense, and their credibility. Would you use this expert in the future?  
 Yes \_\_\_\_\_ No \_\_\_\_\_.  
 If No, explain:
  
13. In dealing with the Municipal Claims Coordinator and Municipal representatives for the member municipality, did you receive their full cooperation?  
 Yes \_\_\_\_\_ No \_\_\_\_\_.  
 If No, explain:
  
14. Were the representatives of the Member Municipality provided with notice of the outcome of the litigation?  
 Yes \_\_\_\_\_ No \_\_\_\_\_.  
 If so, who was provided with notice and how was the notice provided?
  
15. Please utilize this space to make any post-litigation comments you may have. These comments should include reference to the administrative procedures of the Fund, the degree of cooperation between and among the Assigned Defense Counsel, Claims Administrator's staff, Fund Solicitor and the Member Municipalities representatives.

Assigned Defense Counsel: \_\_\_\_\_

BY: \_\_\_\_\_  
 Esquire



Original: Claims Administrator: \_\_\_\_\_ (with enclosures)  
cc: Fund Solicitor: David S. DeWeese, Esquire (with enclosures)  
Claims Supervisor: \_\_\_\_\_ (without enclosures)

## ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND CONFLICT OF INTEREST POLICY

The Commissioners of the Atlantic County Municipal Joint Insurance Fund have determined that the Atlantic County Municipal Joint Insurance Fund is distinguished from commercial insurance providers by virtue of the fact that it is formed by Municipalities, it is funded by public monies (Taxpayer Dollars) appropriated by the Member Municipalities, it serves a public purpose and is responsible for the discharge of its function in a manner consistent with the ethical policies applicable to Municipal Government. As a result, the Fund has adopted a policy applicable to potential conflicts of interest by the officials and professional staff of the Atlantic County Municipal Joint Insurance Fund.

### **Findings:**

1. The Atlantic County Municipal Joint Insurance Fund is a joint enterprise of the following municipalities:

City of Absecon, Borough of Avalon, City of Brigantine, Borough of Buena, City of Cape May, Borough of Cape May Point, Commercial Township, Deerfield Township, Dennis Township, Downe Township, City of Estell Manor, Borough of Folsom, Galloway Township, Hamilton Township, City of Linwood, Borough of Longport, Lower Township, City of Margate, Middle Township, City of Millville, Mullica Township, Borough of Newfield, City of North Wildwood, City of Northfield, City of Ocean City, City of Pleasantville, City of Sea Isle City, City of Somers Point, Borough of Stone Harbor, Upper Township, Upper Deerfield Township, City of Ventnor, Waterford Township, Weymouth Township, Borough of West Cape May, Borough of West Wildwood, City of Wildwood, Borough of Wildwood Crest and Borough of Woodbine, providing those municipalities with General Liability, Police Professional, Property, Workers' Compensation, Cyber Liability and Employment Practices Liability and Public Officials Liability coverage.

2. The municipalities which are members of the Atlantic County Municipal Joint Insurance Fund are jointly responsible for the defense and payment of claims against each other in accordance with the standards and limitations applicable to the Atlantic County Municipal Joint Insurance Fund.

3. While in some aspects of its activity the Atlantic County Municipal Joint Insurance Fund functions in a manner similar to that of a commercial insurance provider, it is clearly distinguished by the fact that it is created by the Member Municipalities; it is governed by Fund Commissioners appointed by the Member Municipalities; its funding is provided exclusively by the Member Municipalities and thereby constitutes public funds; those associated with the Atlantic County Municipal Joint Insurance Fund are compensated with those public funds; the function of the Atlantic County Municipal Joint Insurance Fund is to fulfill a public purpose by providing insurance coverage exclusively to its Member Municipalities; there is a need for those appointed by the Atlantic County Municipal Joint Insurance Fund to freely discuss and evaluate potential liability exposures of the Member Municipalities and to receive information on municipal activities and operations in the same manner as those directly appointed by the Member Municipalities to advise them; and the Atlantic County Municipal Joint Insurance Fund is bound by many of the same laws and regulations applicable to Municipalities with regard to financial records, public contracts and public meetings.

## **Conflict of Interest Policy**

4. It is hereby determined by the Fund Commissioners of the Atlantic County Municipal Joint Insurance Fund that it is in the best interests of the Atlantic County Municipal Joint Insurance Fund and the Member Municipalities to establish a policy regarding potential conflicts of interest affecting those appointed or retained by the Atlantic County Municipal Joint Insurance Fund.

5. It is further determined that it would be inappropriate for an individual appointed or retained by the Atlantic County Municipal Joint Insurance Fund, or for any person owning or employed by the business entity with which the appointed individual is associated, to undertake the representation or appearance on behalf of a party in a matter or claim adverse to that of the Member Municipalities. The potential conflict of interest or appearance of a conflict of interest specifically extends to the assertion of claims against the Member Municipalities and to appearances before agencies of those Municipalities.

6. In determining the nature and extent of the conflict-of-interest policy, guidance can be drawn from the Opinions of the Advisory Committee on Professional Ethics that address the restrictions on Municipal Attorneys and those associated with their law offices and the reasons underlying those Opinions. In adopting this Policy, however, the Fund Commissioners of the Atlantic County Municipal Joint Insurance Fund are aware of Opinion No. 640 issued for attorneys by the Advisory Committee on Professional Ethics which compared a Municipal Joint Insurance Fund to a commercial insurance company and determined that there was not a conflict between representing a Joint Insurance Fund and appearing before a Municipal Agency. To the extent of the policy adopted by this Resolution, the Commissioners of the Atlantic County Municipal Joint Insurance Fund do not adopt the rationale of Opinion No. 640 and hereby determine that the nature of the Atlantic County Municipal Joint Insurance Fund; its creation by the Member Municipalities; its funding by the Member Municipalities; its governance by the Municipal Officials appointed by the Member Municipalities and the need to share confidential information regarding potential liabilities affecting the Member Municipalities is sufficient to present a potential conflict of interest or the potential for an appearance of a conflict of interest and that the same must be avoided by those associated with the Atlantic County Municipal Joint Insurance Fund.

### **Exceptions.**

7. The general policy prohibiting those retained or appointed by the Atlantic County Municipal Joint Insurance Fund from appearing before agencies of the Member Municipalities shall not be applicable to the representation of parties in the Municipal Court for motor vehicle violations, including drunk driving, provided that the defense is not based upon and the parties are not asserting any claim against a police officer, a Municipal Employee or the Municipality for any alleged wrongful or improper action. It is noted that even traffic violations require sensitivity to potential conflicts, since charges arising out of a motor vehicle accident, could well result in a subsequent claim against the Municipality. Those situations which would present a conflict of interest between the representation of a client and the representation of municipal interests should be avoided. Claims against Member Municipalities will need to be evaluated and defended by the Atlantic County Municipal Joint Insurance Fund and the defense should not be compromised by the representation of a party asserting a claim.

8. The general policy prohibiting those retained or appointed by the Atlantic County Municipal Joint Insurance Fund from appearing before agencies of the Member Municipalities may be waived with regard to the representation of parties with minor development applications before the Planning Board or the Zoning Board of Adjustment. Where a person retained or appointed by the Atlantic County Municipal Joint Insurance Fund seeks to appear before the Planning Board or the Zoning Board of Adjustment of a Member Municipality for any relatively minor application, in which there is not a substantial adversarial relationship to the Municipality, a waiver of the conflict-of-interest policy may be requested for that application. The request for the waiver shall be reviewed by the Executive Director and the Solicitor for the Atlantic County Municipal Joint Insurance Fund and the Commissioner representing the Municipality in which the application is to be considered to the Atlantic County Municipal Joint Insurance Fund to determine whether a waiver shall be allowed in the particular matter after considering the nature of the application and whether any use or significant bulk variances are requested.

9. Nothing in the policy adopted herein shall bar an individual from representing or appearing for himself or herself or a member of his or her immediate family residing with him or her before any municipal agency.



To: Fund Commissioners

From: Paul A. Forlenza, MGA, RMC, Executive Director

Date: April 17, 2024

Re: **Executive Director's Report**

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**A. Lost Time Accident Frequency Report (pgs. 76-77)**

The February 2024 Lost Time Accident Frequency Summary and the Statewide Recap for February 2024 are attached for your review.

**B. Certificates of Insurance (pgs. 78-93)**

Summaries of the Certificates of Insurance issued during 2/22/24-3/22/24 are attached for your review.

**C. Financial Fast Track Report (pgs. 94-95)**

The Financial Fast Track Report for Year End 2023 and February 29, 2024 is attached for your review. This report is generated by the Administrative Consultant and provides a "snapshot" of the JIF's financial status. The JIF's surplus position as of Year End was **\$13,760,513** and for February 29, 2024 was **\$14,153,594**

**D. Regulatory Filing Checklists (pgs. 96-97)**

Enclosed please find two regulatory filing checklists that we provide each month as part of our due diligence reporting on behalf of the JIF. These checklists provide an outline of required reporting to the Departments of Banking and Insurance and Community Affairs on an annual and a monthly basis, and the status of the items outlined.

**E. 2023 Safety Incentive Program Awards (pg. 98)**

A letter from our office describing how to collect your 2023 Safety Award Money was emailed out to all members on March 29, 2024. If you have any questions on how to collect your 2023 Safety Incentive allowance, please contact our office. **Please note that the deadline to claim or encumber these funds is December 31, 2024. All encumbered funds had to be claimed by January 31, 2025.**

**F. 2024 Optional Safety Budget (pg. 99)**

A consolidated announcement letter including instructions on how to collect your 2024 Optional Safety Allowance was emailed to all members on or about February 13, 2024. If you have any questions on how to collect your 2024 Optional Safety Budget allowance, please contact our office **Please note that the deadline to claim or encumber these funds is December 31, 2024. All encumbered funds have to be claimed by January 31, 2025.**

**G. 2024 EPL/Cyber Risk Management Budget (pg. 100)**

A consolidated announcement letter including instructions on how to collect your 2024 EPL/Cyber Risk Management Allowance was emailed to all members on or about February 13, 2024. If you

have any questions on how to collect your 2024 EPL/Cyber Risk Management Allowance, please contact our office. **Please note that the deadline to claim or encumber these funds is December 31, 2024. All encumbered funds have to be claimed by January 31, 2025.**

**H. Employment Practices Liability Compliance Status (pg. 101)**

Reports regarding each member's compliance status with the MEL EPL/POL Risk Management Plan is included in the agenda for your review. Each member should review this report carefully to insure its accuracy. If you believe the report to be inaccurate regarding the status of your compliance with the Program can be directed to Sandra Cantwell at [scantwell@permainc.com](mailto:scantwell@permainc.com).

**I. Statutory Bond Status (pgs. 102-104)**

The latest listing of Statutory Bonds issued by the MEL for JIF members is included for your review. This list should be reviewed for accuracy. Please note that these bonds are written for the individual NOT the position to be bond. All applicants for a bond must complete an underwriting application and submit it to the Fund Underwriter for approval. Any questions on the status of an application or a bond listed on the report should be directed to Jonathon Tavares at 856-614-4493 or [jtavares@connerstrong.com](mailto:jtavares@connerstrong.com).

**J. Skateboard Park Approval Status (pg. 105)**

Enclosed, please find a spreadsheet depicting the status of all approved skateboard parks or those currently under construction by a member municipality. The MEL has established a process, outlined in MEL Coverage Bulletin **2024-06**, which must be followed by all members who wish to construct a skateboard park and have the Atlantic JIF and MEL provide said facility with coverage. Any member with a park currently under construction or in the review process should review the enclosed spreadsheet to be sure that it accurately depicts the status of your facility. All members considering construction of a skateboard park should contact the Executive Director's office prior to moving forward.

**K. Capehart & Scatchard Updates (pgs. 106-111)**

John Geaney, Esq. of the law firm of Capehart & Scatchard periodically provides updates on court cases dealing with workers' compensation, ADA, and FMLA issues. Copies of his latest updates are included for your information.

**L. Land Use Training Certification (pg. 112)**

Attached for your review is a list of members that have provided a certification to the Fund Underwriter indicating that at least some of their Board Members have completed the Optional Land Use Training Program. Land Use Board members that complete the training program will be eligible for enhanced coverage should they be personally named in a Land Use claim. Please note that only those Board members that have completed the training are eligible for the enhanced coverage. If you would like additional copies of the Land Use Liability Training Booklets, please contact the Executive Director's office. If you have any questions regarding the individuals that have completed the training, please do not hesitate to contact Jonathon Tavares at 856-614-4493 or [jtavares@connerstrong.com](mailto:jtavares@connerstrong.com).

**M. Monthly Activity Calendars (pgs. 113-114)**

Attached for your review are the monthly activity calendars for the months of April/May 2024.

**N. Elected Officials Training (pgs. 115-116)**

Once again, this year, the Fund will be sponsoring Elected Officials training via the MEL Safety Institute website. The MEL will reduce each member's 2024 MEL Assessment by \$250 for each municipal elected official who completes the training. This credit will also be extended to the

member's CEO (i.e. Municipal Manager or Administrator) who completes the training. The total credit is limited to 5% of a member's 2024 MEL Assessment. Information on how to access the training was emailed to all Municipal Clerks, Fund Commissioners, & RMC's on January 3, 2024, with a reminder sent on April 4, 2024. If you have any questions, or need assistance with the training, please contact the MSI Helpline at 866-661-5120

**O. Safety & Claims Coordinator Roundtable**

The JIF will hold the 2024 Safety, Claims, & Wellness Coordinator Roundtable via Zoom Conferencing on Tuesday, April 30, 2024 starting at 10:00 am and running approximately one hour. An invitation was emailed to all members from the Safety Directors office on April 5, 2024.

**P. New Fund Commissioner Orientation**

This year, the Executive Directors office will hold two (2) New Fund Commissioner Orientation sessions; one in May and the other later this Fall via Microsoft Teams. Anyone who would like an overview of the JIF is welcome to sign up and participate. An email notification with further details on how to participate in this training will be emailed to all members later this month.

**Q. Financial Disclosure Statement Filing**

The Division of Local Government Services utilizes an "on line" process for completion and submission of Financial Disclosure forms. Each Fund Commissioner has a unique PIN # for which to file for their position of Fund Commissioner with the JIF and newly appointed Fund Commissioners receive their Filing PIN # from our office once we are notified of their appointment. An email was sent to all Fund Commissioners on April 3, 2024 along with LFN 2024-08 stating the Financial Annual Filing platform was open for filing and the deadline to file without penalty was April 30, 2024. If you have confirmation of your filing, please be sure to keep it should the Executive Directors office receive notice of non-filer status.

**R. Special Law Enforcement Officer Training**

The Annual SLEO Training will be provided again this year in two (2) sessions in May. Additional information will be forthcoming.

**S. Quarterly Attendance (pg. 117)**

A report detailing attendance records through the first quarter of the 2024 Fund Year is attached. Please be sure to review your attendance, and contact Ms. Kristie at [Kristi\\_Kristie@RPAdmin.com](mailto:Kristi_Kristie@RPAdmin.com) if you feel there are any discrepancies in the report.

**T. Website ([www.acmjif.org](http://www.acmjif.org))**

Please take a moment to explore the website, which contains a plethora of information in an easy to read format and navigate site. If you have any questions, comments, or feedback, please contact Megan Matro at 856-446-9141 or [Megan\\_Matro@rpadmin.com](mailto:Megan_Matro@rpadmin.com).

**U. New Member Activity**

Nothing to report.

**Atlantic County Municipal JIF JOINT INSURANCE FUND**  
**2024 LOST TIME ACCIDENT FREQUENCY EXCLUDING SIR MEMBERS/ EXCLUDING COVID CLAIMS**

DATA VALUED AS OF February 29, 2024

MEMBER_ID	MEMBER	# CLAIMS	Y.T.D.	2024	2023	2022	TOTAL RATE
		** FOR * 2/29/2024	LOST TIME ACCIDENTS	LOST TIME FREQUENCY	LOST TIME FREQUENCY	LOST TIME FREQUENCY	
1	1 Avalon Borough	0	0	0.00	1.76	1.70	1 Avalon Borough 1.60
2	2 Brigantine City	0	0	0.00	2.87	2.48	2 Brigantine City 2.48
3	3 Buena Borough	0	0	0.00	0.00	0.00	3 Buena Borough 0.00
4	5 Cape May City	0	0	0.00	3.73	2.49	4 Cape May City 2.90
5	6 Commercial Township	0	0	0.00	2.90	3.08	5 Commercial Township 2.75
6	7 Deerfield Township	0	0	0.00	0.00	0.00	6 Deerfield Township 0.00
7	8 Dennis Township	0	0	0.00	0.00	0.00	7 Dennis Township 0.00
8	10 Egg Harbor Township	0	0	0.00	2.34	2.24	8 Egg Harbor Township 2.29
9	11 Estell Manor City	0	0	0.00	0.00	0.00	9 Estell Manor City 0.00
10	12 Folsom Borough	0	0	0.00	0.00	0.00	10 Folsom Borough 0.00
11	13 Galloway Township	0	0	0.00	1.62	1.98	11 Galloway Township 1.65
12	20 Mullica Township	0	0	0.00	7.41	0.00	12 Mullica Township 3.36
13	21 Newfield Borough	0	0	0.00	0.00	0.00	13 Newfield Borough 0.00
14	22 North Wildwood City	0	0	0.00	0.71	1.08	14 North Wildwood City 0.82
15	23 Northfield City	0	0	0.00	1.14	5.78	15 Northfield City 3.17
16	27 Somers Point City	0	0	0.00	2.33	2.96	16 Somers Point City 2.44
17	28 Stone Harbor Borough	0	0	0.00	4.86	3.32	17 Stone Harbor Borough 3.79
18	29 Upper Deerfield Township	0	0	0.00	0.00	0.00	18 Upper Deerfield Township 0.00
19	30 Ventnor City	0	0	0.00	1.59	2.48	19 Ventnor City 1.86
20	31 Waterford Township	0	0	0.00	1.13	2.16	20 Waterford Township 1.53
21	32 West Cape May Borough	0	0	0.00	0.00	0.00	21 West Cape May Borough 0.00
22	33 West Wildwood Borough	0	0	0.00	0.00	7.69	22 West Wildwood Borough 3.45
23	34 Weymouth Township	0	0	0.00	2.63	0.00	23 Weymouth Township 1.17
24	36 Woodbine Borough	0	0	0.00	4.08	4.00	24 Woodbine Borough 3.73
25	376 Corbin City	0	0	0.00	0.00	0.00	25 Corbin City 0.00
26	377 Cape May Point Borough	0	0	0.00	0.00	0.00	26 Cape May Point Borough 0.00
27	465 Linwood City	0	0	0.00	1.32	0.00	27 Linwood City 0.62
28	530 Margate City	0	0	0.00	1.30	0.88	28 Margate City 1.00
29	569 Absecon City	0	0	0.00	0.00	0.00	29 Absecon City 0.00
30	595 Downe Township	0	0	0.00	0.00	0.00	30 Downe Township 0.00
31	24 Ocean City	0	1	0.85	1.89	2.19	31 Ocean City 1.95
32	475 Wildwood City	0	1	2.17	2.50	1.83	32 Wildwood City 2.17
33	26 Sea Isle City	1	1	2.39	1.22	4.03	33 Sea Isle City 2.61
34	35 Wildwood Crest Borough	0	1	2.53	0.44	0.92	34 Wildwood Crest Borough 0.82
35	18 Middle Township	1	1	2.65	2.02	1.67	35 Middle Township 1.89
36	14 Hamilton Township	0	1	2.70	2.87	3.55	36 Hamilton Township 3.20
37	25 Pleasantville City	1	1	3.18	5.60	7.75	37 Pleasantville City 6.41
38	375 Upper Township	0	1	4.24	3.17	1.42	38 Upper Township 2.41
39	19 Millville City	0	2	4.72	2.26	2.53	39 Millville City 2.57
40	16 Longport Borough	1	1	5.22	0.90	0.00	40 Longport Borough 0.81
41	17 Lower Township	0	2	5.39	2.20	2.28	41 Lower Township 2.48
Totals:		4	13	1.33	2.07	2.20	2.08

Frequency = ((Y.T.D. LOST TIME ACCIDENT \* 200,000) / ADJUSTED HOURS WORKED)

\* Member does not participate in the FUND for Workers' Comp coverage

\*\* Member has a higher Self Insured Retention for Workers' Comp and is EXCLUDED from this report

\*\*\* MEMBER WAS NOT ACTIVE FOR THIS FUND YEAR

2023 Loss Time Accident Frequency as of February 28, 2023 0.87



**2024 LOST TIME ACCIDENT FREQUENCY ALL JIFs EXCLUDING SIR MEMBERS/ EXCLUDING COVID CLAIMS**

February 29, 2024

FUND	2024 LOST TIME FREQUENCY	2023 LOST TIME FREQUENCY	2022 LOST TIME FREQUENCY	TOTAL RATE * 2024 - 2022
Monmouth County	<b>0.00</b>	0.60	1.02	<b>0.74</b>
Ocean County	<b>0.10</b>	1.39	1.42	<b>1.30</b>
Bergen County	<b>0.23</b>	1.40	1.57	<b>1.38</b>
Morris County	<b>0.25</b>	1.58	1.22	<b>1.31</b>
Burlington County Municipal JI	<b>0.29</b>	1.25	1.43	<b>1.26</b>
Suburban Metro	<b>0.41</b>	1.34	1.66	<b>1.41</b>
South Bergen County	<b>0.48</b>	2.44	2.37	<b>2.26</b>
Central New Jersey	<b>0.57</b>	2.09	2.21	<b>2.01</b>
Suburban Municipal	<b>0.61</b>	1.23	1.26	<b>1.19</b>
Professional Municipal Manage	<b>0.68</b>	1.83	1.74	<b>1.70</b>
NJ Public Housing Authority	<b>0.68</b>	1.58	2.01	<b>1.71</b>
Gloucester, Salem, Cumberland	<b>0.75</b>	1.38	1.38	<b>1.33</b>
NJ Utility Authorities	<b>1.32</b>	1.55	1.42	<b>1.47</b>
Atlantic County Municipal JIF	<b>1.33</b>	2.07	2.20	<b>2.08</b>
Camden County	<b>1.66</b>	1.14	1.52	<b>1.36</b>
<b>AVERAGE</b>	<b>0.62</b>	1.52	1.63	<b>1.50</b>

\* NOTE : lost days may include claims with reserves - where claimant may not yet have had lost time

Conner Strong - Report by Insured Copy

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
4LEJF	Atlantic County Municipal JIF	Township of Upper Deerfield	RERP Program and Homeland Security	637 Bridgeton Avenue		Bridgeton	NJ	08302	Excess Liability,Commercial General Liability,Workers Compensation and Employers' Liability,Automobile Liability	02/23/2024	Evidence of insurance as respects to radios and pagers.
4LEK8	Atlantic County Municipal JIF	Township of Upper Deerfield	NJ Dept of Health & Senior Services	Office of EMS	PO Box 360	Trenton	NJ	08625	Commercial General Liability,Automobile Liability,Excess Liability,Workers Compensation and Employers' Liability	02/23/2024	RE: Re-licensure  Evidence of Insurance as respects to re-licensure. Professional Liability language is included within the Member Manual (General Liability). The Umbrella Liability Policy sits excess of the General Liability Policy. The Professional Liability exclusion in the General Liability does not apply to nurses, EMTs, paramedics, first aid squads, rescue squads or emergency response teams while acting in the scope of their duties on behalf of the insured, including volunteers of the insureds first aid squads, rescue squads and emergency response teams arising out of the rendering or failure to render medical

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											emergency services at the scene of a medical emergency immediately following the occurrence of such emergency.
4LF49	Atlantic County Municipal JIF	Borough of Longport	Atlantic County Board of County Commissioners	201 Shore Road		Northfield	NJ	08225	Automobile Liability,Workers Compensation and Employers' Liability,Commercial General Liability,Excess Liability	03/06/2024	RE: Longport Volunteer Fire Department's Coin Drop  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Longport Volunteer Fire Department's coin drop(s) to be held at CR 692 (Ventnor Avenue) and 29th Avenue, Longport NJ during the current calendar year.
4LF5T	Atlantic County Municipal JIF	City of Somers Point	Jordan Road School	129 Jordan Road		Somers Point	NJ	08244	Commercial General Liability,Excess Liability,Workers Compensation and Employers' Liability,Automobile Liability	03/04/2024	RE: Use of Facilities by the Environmental Commission/Green Team  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											City of Somers Point Environmental Commission/Green Team's use of facilities for sponsored events/activities during the current calendar year.
4LXR5	Atlantic County Municipal JIF	City of Brigantine	Brigantine Community School	301 E. Evans Blvd.		Brigantine	NJ	08203	Excess Liability,Commercial General Liability,Property,Automobile Liability,Workers Compensation and Employers' Liability	03/12/2024	RE: Use of Facilities  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to use of facilities by the City of Brigantine for sponsored events/concerts/programs/meetings during the current calendar year.
									Excess Liability,Property,Commercial General Liability,Automobile Liability,Workers Compensation and Employers' Liability	03/12/2024	
4LZ7F	Atlantic County Municipal JIF	Township of Middle	Middle Township Board of Education	216 S Main Street		Cape May Court House	NJ	08210	Workers Compensation and Employers' Liability,Automobile Liability,Excess Liability,Commercial General Liability	03/21/2024	RE: Middle Township Recreation Lacrosse Program  The Certificate Holder is an Additional Insured on the above-referenced Commercial General

COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											Liability and Excess Liability Policies if required by written contract as respect to the use of facility for the Middle Township Recreation Lacrosse Program using the High School field on Shunpike Road.
FQIFY	Atlantic County Municipal JIF	City of Ventnor	The City of Margate Little League	9001 Winchester Avenue		Margate	NJ	08402	Excess Liability, Workers Compensation and Employers' Liability, Commercial General Liability, Automobile Liability	03/19/2024	RE: Babe Ruth Tournament  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Ventnor City Babe Ruth participation in tournament.
FQJ4E	Atlantic County Municipal JIF	Borough of Newfield	County of Gloucester Board of County Commissioners	it's Departments & Agencies	PO Box 337	Woodbury	NJ	08096	Commercial General Liability, Automobile Liability, Excess Liability, Workers Compensation and Employers' Liability, Property	02/22/2024	RE: Newfield Day Fall Festival Banners  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to a conditional permit for banners on County Routes for Newfield Day Fall Festival advertising.
G1W97	Atlantic County	Borough of Newfield	Gloucester County	138 Bethel Mill Road		Sewell	NJ	08080	Automobile	02/22/2024	RE: Movies in the

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
	Municipal JIF		Parks and Recreation						Liability,Property,Commercial General Liability,Excess Liability,Workers Compensation and Employers' Liability		Park  Gloucester County and the Newfield Board of Education are an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Gloucester County Movies in the Park Program during the current calendar year.
G2I4W	Atlantic County Municipal JIF	Township of Upper Deerfield	County of Salem Fire Academy	135 Cemetary Road		Woodstown	NJ	08098	Workers Compensation and Employers' Liability,Commercial General Liability,Excess Liability,Automobile Liability	02/23/2024	RE: Use of Facilities  Evidence of insurance with respects to use of facilities by Fire Company personnel for training during the current calendar year.
G2I8I	Atlantic County Municipal JIF	City of Ventnor	Babe Ruth League Inc	1670 Whitehorse-Mercerville Road		Hamilton	NJ	08619	Commercial General Liability,Automobile Liability,Workers Compensation and Employers' Liability,Excess Liability	03/19/2024	Re: Girls Softball & Boys Baseball Season  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Girls Softball & Boys Baseball season during current calendar year. As

COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											respects the General Liability coverage, the policies do not have an exclusion for either athletic participation or sexual abuse/molestation.
G2IKK	Atlantic County Municipal JIF	Township of Middle	Middle Township Board of Education	216 S Main Street		Cape May Court House	NJ	08210	Excess Liability, Automobile Liability, Property, Commercial General Liability, Workers Compensation and Employers' Liability	03/21/2024	RE: Middle Township Recreation soccer program  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to use of facility for the Middle Township Recreation soccer program using the Boyd Street Soccer field and all fields.
G2O5X	Atlantic County Municipal JIF	City of Wildwood	City of North Wildwood	901 Atlantic Avenue		North Wildwood	NJ	08260	Excess Liability, Workers Compensation and Employers' Liability, Commercial General Liability, Automobile Liability	02/23/2024	RE: Golf Cart Parade  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to the Christmas in July Golf Cart Parade going through portions of North Wildwood.

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
OSZV2	Atlantic County Municipal JIF	Township of Upper Deerfield	Rutgers University, the State University of NJ	335 George Street	Liberty Place Plaza	New Brunswick	NJ	08903	Commercial General Liability, Excess Liability, Workers Compensation and Employers' Liability, Automobile Liability	02/23/2024	RE: NJDOC Ambulance Services  Rutgers University, The State University of New Jersey is Additional Insured the person(s) or organization(s) as shown in the description section of this certificate of insurance for General Liability & Excess Liability pursuant to the terms, conditions, limitations, and exclusions of the JIF Casualty Insurance Policy (but only with respect to liability caused in whole or in part by the acts or omissions of the named insured) as respects to NJDOC Ambulance Services.
OTOFU	Atlantic County Municipal JIF	Township of Weymouth	US Bank Equipment Finance	P.O. Box 790448		St. Louis	MO	63179	Commercial General Liability, Property, Excess Liability	03/12/2024	RE: RICOH IMC3510 copier serial #9163R510364  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies and Loss Payee on the Property Policy if required by written contract as respects to the RICOH



COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											IMC3510 copier serial #9163R510364, Value \$6,967.00
OTPVG	Atlantic County Municipal JIF	Township of Commercial	Mauricetown Fire Company	9544 Noble Street		Mauricetown	NJ	08329	Commercial General Liability,Workers Compensation and Employers' Liability,Excess Liability,Automobile Liability	02/28/2024	Evidence of Insurance
OU1GN	Atlantic County Municipal JIF	Township of Galloway	ACUA	6700 Delilah Road		Egg Harbor Township	NJ	08234	Excess Liability,Commercial General Liability	02/26/2024	RE: Earth Day  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to OEM's participation in an Earth Day event.  Does not include fireworks or amusements.
P5OG6	Atlantic County Municipal JIF	Township of Weymouth	Community First National Bank AOIA	215 S Seth Child Road		Manhattan	KS	66502	Commercial General Liability,Automobile Liability,Excess Liability,Property	03/13/2024	RE: 2023 AEV Ambulance VIN# 1FDBR1CG8PKA930 82  Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies and Loss Payee on the Property Policy if required by written

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											contract as respects to the 2023 AEV Ambulance VIN# 1FDBR1CG8PKA93082, total cost \$183,855.50
P5PA2	Atlantic County Municipal JIF	Borough of Newfield	County of Gloucester Board of County Commissioners	It's Department & Agencies et al	PO Box 337	Woodbury	NJ	08096	Automobile Liability, Workers Compensation and Employers' Liability, Commercial General Liability, Excess Liability	02/22/2024	RE: Movies in the Park  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Movies in the Park sponsored by the Borough of Newfield.
P61GO	Atlantic County Municipal JIF	City of Brigantine	Enterprise FM Trust	PO Box 16805		St. Louis	MO	63105	Excess Liability, Property, Commercial General Liability, Automobile Liability, Workers Compensation and Employers' Liability	02/26/2024	
									Excess Liability, Property, Workers Compensation and Employers' Liability, Commercial General Liability, Automobile Liability	02/26/2024	RE: Leased Vehicles  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies and Loss Payee on the Property Policy if required by written contract as respects to leased vehicles.

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
XVH44	Atlantic County Municipal JIF	Borough of Longport	County of Atlantic	1333 Atlantic Avenue		Atlantic City	NJ	08401	Excess Liability, Workers Compensation and Employers' Liability, Automobile Liability, Commercial General Liability	03/06/2024	RE: Longport Volunteer Fire Department's Coin Drop  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to Longport Volunteer Fire Department's coin drop(s) to be held at CR 692 (Ventnor Avenue) and 29th Avenue, Longport NJ during the current calendar year.
XVNII	Atlantic County Municipal JIF	Borough of Newfield	County of Gloucester Board of County Commissioners	it's Departments & Agencies	PO Box 337	Woodbury	NJ	08096	Property, Workers Compensation and Employers' Liability, Excess Liability, Automobile Liability, Commercial General Liability	02/22/2024	RE: Newfield Day Fall Festival Parade  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to a conditional permit for activities on County Routes during the Newfield Day Fall Festival Parade.  Does not include amusements, rides, or inflatables.

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
XWC5M	Atlantic County Municipal JIF	Township of Dennis	United Rentals, LLC	3501 New Falls Road		Bristol	NJ	19007	Property,Commercial General Liability,Workers Compensation and Employers' Liability,Excess Liability,Automobile Liability	03/20/2024	
									Workers Compensation and Employers' Liability,Automobile Liability,Property,Commercial General Liability,Excess Liability	03/20/2024	RE: Bucket Truck Equipment # 9561052  United Rentals and its subsidiaries and affiliates are Additional Insured on the above-referenced Commercial General Liability, Automobile Liability and Excess Liability Policies and Loss Payee on the Property Policy if required by written contract as respects to rental equipment Bucket Truck Equipment # 9561052, Cost \$173,592.
XWCPW	Atlantic County Municipal JIF	City of Ventnor	Tropicana Casino and Resort	Brighton Ave & Boardwalk		Atlantic City,	NJ	08401	Excess Liability,Automobile Liability,Commercial General Liability,Workers Compensation and Employers' Liability	03/01/2024	RE: staging area for NJ MVC  Certificate holder is an Additional Insured on the general and excess liability policies as respects to the use of the location as a secondary checkpoint area and a staging area for

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											NJ MVC to conduct their inspections of vehicles.
XWELN	Atlantic County Municipal JIF	Township of Middle	First Commonwealth Equipment Finance a divison of	first Commonwealth Bank	920 Cassatt Road Suite 310	Berwyn	NJ	19312	Automobile Liability,Property,Workers Compensation and Employers' Liability,Commercial General Liability,Excess Liability	03/21/2024	RE: HVAC equipment repairs  Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies and Loss Payee on the Property Policy if required by written contract as respects to HVAC equipment repairs values at \$369,501for Cape May Court House Fire Dist1
									Workers Compensation and Employers' Liability,Excess Liability,Property,Commercial General Liability,Automobile Liability	03/21/2024	
Y7MW 1	Atlantic County Municipal JIF	Township of Weymouth	County of Gloucester Board of County Commissioners	It's Department & Agencies et al	PO Box 337	Woodbury	NJ	08096	Workers Compensation and Employers' Liability,Commercial General Liability,Excess Liability,Automobile Liability	02/22/2024	RE: Dispatch Services  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect to dispatch services including police, fire

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											and EMS services.
Y7NGF	Atlantic County Municipal JIF	City of Ventnor	Little League Baseball Inc	PO Box 3485		Williamsport	PA	17701	Excess Liability,Workers Compensation and Employers' Liability,Commercial General Liability,Automobile Liability	03/19/2024	RE: Little League Season, Ventnor Little League and Ventnor City Rec Dept.  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect Little League Season during current calendar year, Ventnor Little League and Ventnor City Rec Department The JIF policies do not include exclusions for athletic participation or sexual abuse/molestation. However coverage is subject to the terms and conditions of the JIF Policies
Y7P36	Atlantic County Municipal JIF	City of Absecon	Absecon Board of Education	800 Irelan Avenue		Absecon	NJ	08201	Automobile Liability,Commercial General Liability,Workers Compensation and Employers' Liability,Excess Liability	02/29/2024	RE: Use of school gym  Evidence of insurance as respects to use of school gym for Men's Basketball League under the Parks and Playgrounds.
Y803E	Atlantic County Municipal JIF	Township of Upper Deerfield	Cumberland County Board of County Commissioners	County Administration Bldg	164 W Broad Street	Bridgeton	NJ	08302	Workers Compensation and Employers' Liability,Commercial	02/23/2024	Re: Use of Fire and EMS Training Center  The Certificate

COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
									General Liability, Excess Liability, Automobile Liability		Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if required by written contract as respect use of fire and EMS training center at 637 Bridgeton Ave., Bridgeton, NJ 08302 during the current calendar year.
Y8BDW	Atlantic County Municipal JIF	City of Wildwood		1st Bank of Sea Isle			y_	me":	Excess Liability, Commercial General Liability, Automobile Liability, Workers Compensation and Employers' Liability	03/12/2024	<ul style="list-style-type: none"> <li>●A LITTLE CAKE- 176 KINDERKAMACK ROAD, PARK RIDGE, NJ 07656</li> <li>●A LITTLE CAKE- 96 E ALLENDALE ROAD, SADDLE RIVER, NJ 07458</li> <li>●A LITTLE CAKE- 221 W GRAND AVENUE, MONTVALE, NJ 07645</li> <li>●A LITTLE CAKE- 50 Tice Boulevard, WOODCLIFF LAKE, NJ 07677</li> <li>●ACE GLOBAL BUSINESS SERVICES, LLC- 574 WESTWOOD AVE, RIVERVALE, NJ 07675</li> <li>●ACE GLOBAL BUSINESS SERVICES, LLC- 29 PASCACK ROAD, PARK RIDGE NJ</li> <li>●ACE GLOBAL</li> </ul>

COI ID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											BUSINESS SERVICES, LLC- 45 Whitney Road, #2M, Mahwah, NJ 07430 ●ACE GLOBAL BUSINESS SERVICES, LLC- 250 OLD HOOK ROAD, WESTWOOD, NJ 07675 ●ADM Tronics- 224S Pegasus Avenue, Northvale, NJ 07647 ●ADM Tronics- 247 E. RIDGWOOD AVE, RIDGEWOOD, NJ 07450 ●ADM Tronics- 100 University Plaza Dr., Hackensack, NJ 07601 ●Advanced Dental Anesthesia LLC- 179 Old Tappan Road, Bldg 1, Unit 5, Old Tappan, NJ 07674
Y8D5H	Atlantic County Municipal JIF	City of Somers Point	Jordan Road School	129 Jordan Road		Somers Point	NJ	08244	Excess Liability,Commercial General Liability	03/04/2024	Evidence of insurance as respects the use of facilities by the City of Somers Point for sponsored events and activities during the current calendar year.
Y8ELO	Atlantic County Municipal JIF	Township of Upper	Atlantic Cape Community College	341 Court House - South Dennis Road		Cape May Court House	NJ	08210	Excess Liability,Automobile Liability,Workers Compensation and Employers' Liability,Commercial General Liability	03/21/2024	RE: Use of Facility, 6 Gladwyn Drive  The Certificate Holder is an Additional Insured on the above-referenced Commercial General Liability and Excess Liability Policies if



COIID	Insured	Named Insured	Cert Holder - Name	Cert Holder - Address	Cert Holder - Address 2	Cert Holder - City	Cert Holder - State	Cert Holder - Postal Code	Policy Type	Date of Last Share Date	Description of Operations
											required by written contract as respect to Use of Facility, 6 Gladwyn Drive, Ocean View, NJ 08230 Regional Hub Meeting, Resources Workshop taking place during the current policy period

**ATLANTIC COUNTY MUNICIPAL FUND  
FINANCIAL FAST TRACK REPORT  
AS OF December 31, 2023**

	<i>THIS MONTH</i>	<i>YTD</i>	<i>PRIOR YEAR END</i>	<i>FUND BALANCE</i>
1. <b>UNDERWRITING INCOME</b>	<b>2,270,654</b>	<b>27,247,844</b>	<b>529,499,650</b>	<b>556,747,494</b>
2. <b>CLAIM EXPENSES</b>				
Paid Claims	1,115,234	10,383,129	254,161,021	264,544,150
Case Reserves	(371,585)	1,577,391	18,992,224	20,569,615
IBNR	90,834	3,742,060	12,141,012	15,883,072
Recoveries	76	(60,841)	(1,084,476)	(1,145,316)
<b>TOTAL CLAIMS</b>	<b>834,559</b>	<b>15,641,739</b>	<b>284,209,781</b>	<b>299,851,520</b>
3. <b>EXPENSES</b>				
Excess Premiums	610,676	7,331,537	117,875,391	125,206,928
Administrative	388,009	3,764,577	84,545,779	88,310,356
<b>TOTAL EXPENSES</b>	<b>998,685</b>	<b>11,096,114</b>	<b>202,421,170</b>	<b>213,517,283</b>
4. <b>UNDERWRITING PROFIT (1-2-3)</b>	437,409	509,991	42,868,699	43,378,691
5. <b>INVESTMENT INCOME</b>	467,801	2,193,743	21,653,261	23,847,004
6. <b>DIVIDEND INCOME</b>	0	0	2,749,272	2,749,272
7. <b>STATUTORY PROFIT (4+5+6)</b>	<b>905,210</b>	<b>2,703,735</b>	<b>67,271,232</b>	<b>69,974,967</b>
8. <b>DIVIDEND</b>	0	2,000,000	50,088,945	52,088,945
9. <b>RCF &amp; MEL Additional Assessments</b>	109,780	109,780	4,129,447	4,239,226
<b>10. STATUTORY SURPLUS (7-8-9)</b>	<b>795,430</b>	<b>593,955</b>	<b>13,052,841</b>	<b>13,646,796</b>

**SURPLUS (DEFICITS) BY FUND YEAR**

Closed	198,483	(1,275,767)	10,747,721	9,471,954
MEL Unencumbered Surplus Account	184,987	261,885	1,045,379	1,307,264
2019		0	0	0
2020	125,569	(1,260,062)	2,604,486	1,344,423
2021	166,043	1,211,964	(2,291,597)	(1,079,633)
2022	224,812	1,222,356	946,852	2,169,208
2023	(104,464)	433,579		433,579
<b>TOTAL SURPLUS (DEFICITS)</b>	<b>795,430</b>	<b>593,955</b>	<b>13,052,841</b>	<b>13,646,796</b>
<b>TOTAL CASH</b>				<b>48,980,072</b>

**CLAIM ANALYSIS BY FUND YEAR**

<b>TOTAL CLOSED YEAR CLAIMS</b>	<b>(180,981)</b>	<b>(64,392)</b>	<b>246,242,068</b>	<b>246,177,676</b>
<b>FUND YEAR 2020</b>				
Paid Claims	284,306	1,862,523	7,332,675	9,195,198
Case Reserves	(305,482)	(3,937)	2,682,352	2,678,415
IBNR	(66,556)	(328,925)	1,224,862	895,937
Recoveries	(390)	(60,841)	(1,084,476)	(1,145,316)
<b>TOTAL FY 2020 CLAIMS</b>	<b>(88,122)</b>	<b>1,468,820</b>	<b>10,155,414</b>	<b>11,624,234</b>
<b>FUND YEAR 2021</b>				
Paid Claims	217,018	1,795,649	6,515,763	8,311,412
Case Reserves	(266,980)	(1,359,325)	5,327,667	3,968,342
IBNR	(14,991)	(1,348,092)	3,226,782	1,878,690
Recoveries	-	0	0	0
<b>TOTAL FY 2021 CLAIMS</b>	<b>(64,954)</b>	<b>(911,768)</b>	<b>15,070,212</b>	<b>14,158,444</b>
<b>FUND YEAR 2022</b>				
Paid Claims	189,783	2,505,558	2,675,957	5,181,515
Case Reserves	186,994	113,374	3,629,567	3,742,941
IBNR	(488,027)	(3,334,744)	6,436,564	3,101,820
Recoveries	466	0	0	0
<b>TOTAL FY 2022 CLAIMS</b>	<b>(110,784)</b>	<b>(715,811)</b>	<b>12,742,088</b>	<b>12,026,277</b>
<b>FUND YEAR 2023</b>				
Paid Claims	298,864	2,863,285		2,863,285
Case Reserves	143,034	3,926,347		3,926,347
IBNR	837,501	9,075,258		9,075,258
Recoveries	-	0		0
<b>TOTAL FY 2023 CLAIMS</b>	<b>1,279,400</b>	<b>15,864,890</b>		<b>15,864,890</b>
<b>COMBINED TOTAL CLAIMS</b>	<b>834,559</b>	<b>15,641,739</b>	<b>284,209,781</b>	<b>299,851,520</b>

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

Fund Year 2020 Claims reflect anticipated recoverable amounts from the MEL of \$1,294,855 (Paid: \$1,145,317 Reserves: \$149,538)

**ATLANTIC COUNTY MUNICIPAL FUND  
FINANCIAL FAST TRACK REPORT  
AS OF February 29, 2024**

	<i>THIS MONTH</i>	<i>YTD</i>	<i>PRIOR YEAR END</i>	<i>FUND BALANCE</i>
1. UNDERWRITING INCOME	2,305,907	4,611,815	556,747,494	561,359,309
2. CLAIM EXPENSES				
Paid Claims	717,255	1,470,934	264,544,150	266,015,084
Case Reserves	475,194	460,109	20,569,615	21,029,724
IBNR	(137,202)	189,329	15,883,072	16,072,401
Recoveries	(6,848)	(22,438)	(1,145,316)	(1,167,755)
<b>TOTAL CLAIMS</b>	<b>1,048,399</b>	<b>2,097,933</b>	<b>299,851,520</b>	<b>301,949,453</b>
3. EXPENSES				
Excess Premiums	738,504	1,477,007	125,206,928	126,683,935
Administrative	352,207	634,145	88,310,356	88,944,500
<b>TOTAL EXPENSES</b>	<b>1,090,711</b>	<b>2,111,152</b>	<b>213,517,283</b>	<b>215,628,435</b>
4. UNDERWRITING PROFIT (1-2-3)	166,797	402,730	43,378,691	43,781,421
5. INVESTMENT INCOME	126,237	266,977	25,001,046	25,268,023
6. DIVIDEND INCOME	0	0	2,749,272	2,749,272
7. STATUTORY PROFIT (4+5+6)	<b>293,035</b>	<b>669,707</b>	<b>71,129,009</b>	<b>71,798,716</b>
8. DIVIDEND	0	0	52,088,945	52,088,945
9. RCF & MEL Additional Assessments	0	0	4,239,226	4,239,226
<b>10. STATUTORY SURPLUS (7-8-9)</b>	<b>293,035</b>	<b>669,707</b>	<b>14,800,837</b>	<b>15,470,544</b>
11. Unrealized Gain (Loss)	(205,192)	(162,908)	(1,154,042)	(1,316,950)
<b>12. GAAP SURPLUS (w/o Investment in Joir</b>	<b>87,842</b>	<b>506,799</b>	<b>13,646,796</b>	<b>14,153,594</b>

**SURPLUS (DEFICITS) BY FUND YEAR**

Closed	(21,112)	37,811	9,471,954	9,509,765
MEL Unencumbered Surplus Account	(3,947)	5,112	1,307,264	1,312,376
2020	(5,908)	7,937	1,344,423	1,352,360
2021	(7,396)	10,210	(1,079,633)	(1,069,422)
2022	(14,444)	19,160	2,169,208	2,188,368
2023	(21,343)	29,070	433,579	462,649
2024	161,993	397,498		397,498
<b>TOTAL SURPLUS (DEFICITS)</b>	<b>87,842</b>	<b>506,799</b>	<b>13,646,796</b>	<b>14,153,594</b>
<b>TOTAL CASH</b>				<b>49,540,451</b>

**CLAIM ANALYSIS BY FUND YEAR**

<b>TOTAL CLOSED YEAR CLAIMS</b>	<b>(1,562)</b>	<b>(1,989)</b>	<b>246,177,676</b>	<b>246,175,687</b>
<b>FUND YEAR 2020</b>				
Paid Claims	217,082	303,156	9,195,198	9,498,354
Case Reserves	(26,684)	(71,094)	2,678,415	2,607,321
IBNR	(183,550)	(209,623)	895,937	686,314
Recoveries	(6,848)	(22,438)	(1,145,316)	(1,167,755)
<b>TOTAL FY 2020 CLAIMS</b>	<b>(0)</b>	<b>0</b>	<b>11,624,234</b>	<b>11,624,234</b>
<b>FUND YEAR 2021</b>				
Paid Claims	138,407	316,496	8,311,412	8,627,908
Case Reserves	(76,912)	(83,365)	3,968,342	3,884,978
IBNR	(61,495)	(233,132)	1,878,690	1,645,559
Recoveries	-	0	0	0
<b>TOTAL FY 2021 CLAIMS</b>	<b>(0)</b>	<b>0</b>	<b>14,158,444</b>	<b>14,158,444</b>
<b>FUND YEAR 2022</b>				
Paid Claims	81,786	210,562	5,181,515	5,392,077
Case Reserves	160,719	68,929	3,742,941	3,811,871
IBNR	(242,504)	(279,491)	3,101,820	2,822,329
Recoveries	-	0	0	0
<b>TOTAL FY 2022 CLAIMS</b>	<b>0</b>	<b>0</b>	<b>12,026,277</b>	<b>12,026,277</b>
<b>FUND YEAR 2023</b>				
Paid Claims	198,762	542,713	2,863,285	3,405,998
Case Reserves	(42,491)	(69,041)	3,926,347	3,857,305
IBNR	(156,271)	(473,671)	9,075,258	8,601,587
Recoveries	-	0	0	0
<b>TOTAL FY 2023 CLAIMS</b>	<b>0</b>	<b>0</b>	<b>15,864,890</b>	<b>15,864,890</b>
<b>FUND YEAR 2024</b>				
Paid Claims	82,780	99,996		99,996
Case Reserves	460,563	614,680		614,680
IBNR	506,619	1,385,247		1,385,247
Recoveries	-	0		0
<b>TOTAL FY 2024 CLAIMS</b>	<b>1,049,961</b>	<b>2,099,922</b>		<b>2,099,922</b>
<b>COMBINED TOTAL CLAIMS</b>	<b>1,048,399</b>	<b>2,097,933</b>	<b>299,851,520</b>	<b>301,949,453</b>

This report is based upon information which has not been audited nor certified by an actuary and as such may not truly represent the condition of the fund.

Fund Year 2020 Claims reflect anticipated recoverable amounts from the MEL of \$1,553,752 (Paid: \$1,167,755 Reserves: \$385,997)

**Atlantic County Municipal Joint Insurance Fund**

**Monthly Regulatory Filing Check List**

**Fund Year 2024 for Month of March**

<b>ITEM</b>	<b>FILING STATUS</b>
Meeting Minutes	4/18/24
Bylaws Amendments	N/A
Risk Management Program Changes	N/A
New Member Filings	N/A
Supplemental Assessments/Contributions	N/A
Budget Amendments (transfers, etc.)	N/A
Surplus Distribution (refunds/dividends)	N/A
Changes/Amendments/Additions to Service Providers	N/A
Executive Committee Changes	N/A

**Atlantic County Municipal Joint Insurance Fund**  
**Annual Regulatory Filing Check List**  
**Year: January 1, 2024 – December 31, 2024**

ITEM	FILING STATUS
Ethics Filings ( <i>Notification emailed to FC's and Prof's</i> )	4/3/24
Renewal Resolutions and Indemnity & Trust Agreements	
Budget and Actuarial Certification/Opinion Letter	1/6/24
Annual Assessments/Contributions	1/6/24
Supplemental Assessments/Contributions	
Risk Management Program	1/19/24
Annual Certified Audit	
List of Fund Commissioners & Executive Committee	1/19/24
Identity of Administrator	1/19/24
Identity of Treasurer	1/19/24
Excess Insurance /Group Purchase Insurance/Reinsurance Policies	1/19/24
Withdrawals	
Exhibit A – Certification of JIF Fund Professionals	1/19/24
Exhibit B – Certification of JIF Data Forms	
Exhibit D – New Member Filings	
New Service Providers	1/19/24
Annual Reorganization Resolutions, including Cash Management Plan	1/19/24

Professionals	Contract	Gen Ins.	Fidelity	E & O	Surety
<b>Actuary</b> – Actuarial Advantage	X	1/1/25	N/A	1/1/25	N/A
<b>Administrative Consultant</b> PERMA	X	12/10/24	N/A	12/10/24	N/A
<b>Administrator</b> – RPA	X	10/1/24	5/1/20	10/1/24	N/A
<b>Asset Manager</b> – Wilmington Trust	X	5/1/23	JIF	10/1/22	N/A
<b>Banking</b> – M & T	X	N/A	5/1/23	N/A	N/A
<b>Attorney</b> – DeWeese	X	9/1/24	N/A	9/1/24	N/A
<b>Attorney</b> (Subrogation) – DeWeese	X	9/1/24	N/A	9/1/24	N/A
<b>Auditor</b> - Bowman	X	1/1/25	N/A	N/A	N/A
<b>Claims Administrator</b> – Qual-Lynx	X	4/29/24	4/3/23	4/29/24	12/31/18
<b>Managed Care</b> – QualCare	X	4/29/24	N/A	4/29/24	N/A
<b>Payroll Auditor</b> – Bowman	X	1/1/25	N/A	1/1/25	N/A
<b>Property Appraiser</b> – Assetworks	X	9/27/24	N/A	9/27/24	N/A
<b>Safety Director</b> – JA Montgomery	X	12/10/24	N/A	12/10/24	N/A
<b>Underwriting Manager</b> – Conner Strong	X	12/10/24	N/A	12/10/24	N/A
<b>Technology Risk Svcs</b> – Wintsec	X	4/11/24	N/A	4/11/24	N/A
<b>Website</b> – Joyce Media	X	N/A	N/A	N/A	N/A
<b>Treasurer</b> – J. Hansen	X	N/A	5/1/18	N/A	N/A
<b>Recording Secretary</b> - T. Forlenza	X	N/A	N/A	N/A	N/A
<b>Law Enforcement RMC</b> – Chris Winter	X	3/31/23	N/A	N/A	N/A
<b>Wellness Director</b> – Jordan Simone	X	N/A	N/A	N/A	N/A

**Atlantic County Municipal Joint Insurance Fund  
2023 SIP Qualifiers Award**

Member Municipality	Town Size	Opening Balance	January 2024	February 2024	March 2024	April 2024	May 2024	June 2024	July 2024	August 2024	September 2024	October 2024	November 2024	December 2024	Paid in 2025	Total YTD Expenses	Ending Balance	Encumb Funds	LUNCH AWARD
Absecon City	M	2,500.00				2,500.00										2,500.00	0.00		N/A
Avalon Borough	M	2,500.00														0.00	2,500.00		
Brigantine City	L	2,750.00														0.00	2,750.00		N/A
Buena Borough	S	2,250.00														0.00	2,250.00		N/A
Cape May City	L	2,750.00														0.00	2,750.00		N/A
Cape May Point Borough	XS	2,000.00				2,000.00										2,000.00	0.00		N/A
Commercial Township	XS	2,000.00														0.00	2,000.00		N/A
Deerfield Township	XS	2,000.00														0.00	2,000.00		N/A
Dennis Township	S	2,250.00														0.00	2,250.00		N/A
Downe Township	XS	2,000.00														0.00	2,000.00		N/A
Estell Manor City	XS	2,000.00				2,000.00										2,000.00	0.00		N/A
Folsom Borough	XS	2,000.00				2,000.00										2,000.00	0.00		N/A
Galloway Township	XL	3,000.00				3,000.00										3,000.00	0.00		
Hamilton Township	XL	3,000.00				3,000.00										3,000.00	0.00		N/A
Linwood City	M	2,500.00														0.00	2,500.00		N/A
Longport Borough	S	2,250.00														0.00	2,250.00		N/A
Lower Township	L	2,750.00														0.00	2,750.00		N/A
Margate City	L	2,750.00				2,750.00										2,750.00	0.00		N/A
Middle Township	L	2,750.00														0.00	2,750.00		N/A
Millville City	XL	3,000.00				3,000.00										3,000.00	0.00		N/A
Mullica Township	S	2,250.00				2,250.00										2,250.00	0.00		N/A
Newfield Borough	XS	2,000.00														0.00	2,000.00		N/A
North Wildwood City	L	2,750.00														0.00	2,750.00		N/A
Northfield City	M	2,500.00				2,500.00										2,500.00	0.00		N/A
Ocean City	XL	3,000.00														0.00	3,000.00		N/A
Pleasantville City	XL	3,000.00														0.00	3,000.00		N/A
Sea Isle City	L	2,750.00				2,750.00										2,750.00	0.00		N/A
Somers Point City	M	2,500.00														0.00	2,500.00		N/A
Stone Harbor Borough	M	2,500.00														0.00	2,500.00		N/A
Upper Township	M	2,500.00														0.00	2,500.00		N/A
Upper Deerfield Township	S	2,250.00														0.00	2,250.00		N/A
Ventnor City	L	2,750.00				2,750.00										2,750.00	0.00		N/A
Waterford Township	M	2,500.00														0.00	2,500.00		
West Cape May Borough	XS	2,000.00														0.00	2,000.00		N/A
West Wildwood Borough	XS	2,000.00														0.00	2,000.00		N/A
Weymouth Township	XS	2,000.00														0.00	2,000.00		N/A
Wildwood City	XL	3,000.00				3,000.00										3,000.00	0.00		N/A
Wildwood Crest Borough	M	2,500.00				2,500.00										2,500.00	0.00		N/A
Woodbine Borough	XS	2,000.00														0.00	2,000.00		N/A
<b>Total By Line</b>		<b>\$95,750.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>36,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>36,000.00</b>	<b>59,750.00</b>		

**Must be Claimed or Encumbered by December 31, 2024. All Encumbered Funds Must be Claimed by January 31, 2025**

**Atlantic County Municipal Joint Insurance Fund  
2024 Optional Safety Budget**

Member Municipality	Opening Balance	January 2024	February 2024	March 2024	April 2024	May 2024	June 2024	July 2024	August 2024	September 2024	October 2024	November 2024	December 2024	Paid 2025	Total YTD Paid	Remaining Balance	Date Encumbered
Absecon City																N/A	
Avalon Borough	\$1,500.00														\$0.00	\$1,500.00	
Brigantine City	\$2,000.00														\$0.00	\$2,000.00	
Buena Borough																N/A	
Cape May City	\$1,500.00														\$0.00	\$1,500.00	
Cape May Point Borough	\$1,000.00														\$0.00	\$1,000.00	
Commercial Township	\$1,500.00														\$0.00	\$1,500.00	
Deerfield Township																N/A	
Dennis Township																N/A	
Downe Township																N/A	
Estell Manor City																N/A	
Folsom Borough																N/A	
Galloway Township																N/A	
Hamilton Township	\$2,000.00														\$0.00	\$2,000.00	
Linwood City	\$1,500.00														\$0.00	\$1,500.00	
Longport Borough																N/A	
Lower Township	\$2,000.00														\$0.00	\$2,000.00	
Margate City																N/A	
Middle Township																N/A	
Millville City																N/A	
Mullica Township																N/A	
Newfield Borough	\$1,000.00														\$0.00	\$1,000.00	
North Wildwood City																N/A	
Northfield City	\$1,500.00														\$0.00	\$1,500.00	
Ocean City	\$2,500.00														\$0.00	\$2,500.00	
Pleasantville City	\$2,500.00														\$0.00	\$2,500.00	
Sea Isle City																N/A	
Somers Point City																N/A	
Stone Harbor Borough	\$1,500.00														\$0.00	\$1,500.00	
Upper Township																N/A	
Upper Deerfield Township																N/A	
Ventnor City																N/A	
Waterford Township	\$1,500.00														\$0.00	\$1,500.00	
West Cape May Borough	\$1,000.00														\$0.00	\$1,000.00	
West Wildwood Borough																N/A	
Weymouth Township	\$1,000.00														\$0.00	\$1,000.00	
Wildwood City	\$2,500.00														\$0.00	\$2,500.00	
Wildwood Crest Borough																N/A	
Woodbine Borough																N/A	
<b>Total By Line</b>	<b>\$28,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$28,000.00</b>	

**Must be Claimed or Encumbered by December 31, 2024. All Encumbered Funds Must be Claimed by January 31, 2025**

**Atlantic County Municipal Joint Insurance Fund  
2024 EPL/CYBER Risk Management Budget**

Member Municipality	Opening Balance	January 2024	February 2024	March 2024	April 2024	May 2024	June 2024	July 2024	August 2024	Sept. 2024	October 2024	November 2024	December 2024	Paid in 2025	Total YTD Expenses	Ending Balance	Date Encumbered
Absecon City	725.00														0.00	\$725.00	
Avalon Borough	725.00														0.00	\$725.00	
Brigantine City	725.00														0.00	\$725.00	
Buena Borough	725.00														0.00	\$725.00	
Cape May City	725.00														0.00	\$725.00	
Cape May Point Borough	725.00														0.00	\$725.00	
Commercial Township	725.00														0.00	\$725.00	
Deerfield Township	725.00														0.00	\$725.00	
Dennis Township	725.00														0.00	\$725.00	
Downe Township	725.00														0.00	\$725.00	
Estell Manor City	725.00														0.00	\$725.00	
Folsom Borough	725.00														0.00	\$725.00	
Galloway Township	725.00			725.00											725.00	\$0.00	
Hamilton Township	725.00														0.00	\$725.00	
Linwood City	725.00														0.00	\$725.00	
Longport Borough	725.00														0.00	\$725.00	
Lower Township	725.00				725.00										725.00	\$0.00	
Margate City	725.00			725.00											725.00	\$0.00	
Middle Township	725.00														0.00	\$725.00	
Millville City	725.00														0.00	\$725.00	
Mullica Township	725.00														0.00	\$725.00	
Newfield Borough	725.00														0.00	\$725.00	
North Wildwood City	725.00														0.00	\$725.00	
Northfield City	725.00														0.00	\$725.00	
Ocean City	725.00														0.00	\$725.00	
Pleasantville City	725.00														0.00	\$725.00	
Sea Isle City	725.00														0.00	\$725.00	
Somers Point City	725.00														0.00	\$725.00	
Stone Harbor Borough	725.00														0.00	\$725.00	
Upper Township	725.00														0.00	\$725.00	
Upper Deerfield Townshi	725.00														0.00	\$725.00	
Ventnor City	725.00														0.00	\$725.00	
Waterford Township	725.00														0.00	\$725.00	
West Cape May Borough	725.00														0.00	\$725.00	
West Wildwood Borough	725.00														0.00	\$725.00	
Weymouth Township	725.00														0.00	\$725.00	
Wildwood City	725.00														0.00	\$725.00	
Wildwood Crest Borough	725.00														0.00	\$725.00	
Woodbine Borough	725.00														0.00	\$725.00	
<b>Total By Line</b>	<b>\$28,275.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,450.00</b>	<b>\$725.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,175.00</b>	<b>\$26,100.00</b>	

**Must be Claimed or Encumbered by December 31, 2024. All Encumbered Claims Must be Claimed by January 31, 2025**



MUNICIPAL EXCESS LIABILITY JOINT INSURANCE FUND							
EMPLOYMENT PRACTICES COMPLIANCE STATUS - Atlantic County JIF							
Data Valued As of :		April 3, 2024					
Total Participating Members		39					
Complaint		37					
Percent Compliant		94.87%					
			01/01/24		2024		
	Checklist Submitted	Compliant	EPL		POL	Amended Deductible	Co-Insurance
Member Name	*		Deductible		Deductible	Date	01/01/24
ABSECON	Yes	Yes	\$ 10,000		\$ 10,000		0%
AVALON	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
BRIGANTINE	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
BUENA	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
CAPE MAY	Yes	Yes	\$ 20,000	Police have \$100,000 EPL deductible	\$ 20,000		20% of 1st 250K
CAPE MAY POINT	Yes	Yes	\$ 2,500		\$ 2,500		0%
COMMERCIAL	Yes	Yes	\$ 5,000		\$ 5,000		0%
DEERFIELD	Yes	Yes	\$ 10,000		\$ 10,000		0%
DENNIS	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
DOWNE TOWNSHIP	No	No	\$ 100,000		\$ 20,000		20% of 1st 2Mil for EPL/0% for POL
ESTELL MANOR	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
FOLSOM	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
GALLOWAY	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 100K
HAMILTON	Yes	Yes	\$ 10,000		\$ 10,000		20% of 1st 100K
LINWOOD	Yes	Yes	\$ 10,000		\$ 10,000		0%
LONGPORT	Yes	Yes	\$ 10,000		\$ 10,000		20% of 1st 100K
LOWER	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
MARGATE	Yes	Yes	\$ 10,000		\$ 10,000		20% of 1st 100K
MIDDLE	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
MILLVILLE	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
MULLICA	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
NEWFIELD	Yes	Yes	\$ 10,000		\$ 10,000		0%
NORTH WILDWOOD	Yes	Yes	\$ 20,000		\$ 20,000		0%
NORTHFIELD	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
OCEAN CITY	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
PLEASANTVILLE	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
SEA ISLE CITY	Yes	Yes	\$ 5,000		\$ 5,000		0%
SOMERS POINT	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 100K
STONE HARBOR	Yes	Yes	\$ 20,000		\$ 20,000		0%
UPPER	Yes	Yes	\$ 50,000		\$ 50,000		20% of 1st 250K
UPPER DEERFIELD	Yes	Yes	\$ 20,000		\$ 20,000		0%
VENTNOR	Yes	Yes	\$ 10,000		\$ 10,000	01/01/24	20% of 1st 100K
WATERFORD	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
WEST CAPE MAY	Yes	Yes	\$ 2,500		\$ 2,500		0%
WEST WILDWOOD	Yes	Yes	\$ 20,000	\$75K Police Deductible	\$ 20,000		20% of 1st 250K
WEYMOUTH	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
WILDWOOD CITY	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
WILDWOOD CREST	Yes	Yes	\$ 20,000		\$ 20,000		20% of 1st 250K
WOODBINE	No	No	\$ 100,000		\$ 20,000		20% of 1st 2Mil/20% of 1st 250K POL

\* Member does NOT participate in EPL coverage

# MEL STATUTORY BONDS as of 4/3/24

Name	Applicant	Active Statutory Bond	Bond Position 1	Effective Date	Position 1 Status	Position 1 Delete Date	Position 1 Condition	Position 2	Effective Date	Position 2 Status	Position 2 Delete Date	Position 2 Status
Absecon City	Jessica Snyder	Yes	Tax Collector	06/01/2019	Approved							Approved
Absecon City	Jessica Thompson	Yes	CFO (Assuming Treasurer Duties)	01/01/2020	Approved							Approved
Avalon Borough	James V. Craft	Yes	CFO (Assuming Treasurer Duties)	12/06/2007	Approved							Approved
Avalon Borough	James A. Thatcher	Yes	Library Treasurer	11/14/2007	Approved							Approved
Avalon Borough	Connie L. DiCola	No	Tax Collector	01/01/2007	Approved	01/01/2017						Approved
Avalon Borough	Alexis Coan	No	Tax Collector	09/01/2016	Approved	01/31/2021						Approved
Avalon Borough	Eleanor Cifaloglio	Yes	Tax Collector	02/01/2021	Approved							Approved
Brigantine City	Dana Wineland	Yes	Tax Collector	01/13/2007	Approved							Approved
Brigantine City	Roxanne Tosto	No	CFO (Assuming Treasurer Duties)	11/17/2020	Approved	01/01/2023						Approved
Brigantine City	Albert Stanley	Yes	CFO (Assuming Treasurer Duties)	01/01/2023	Approved							Approved
Buena Borough	Maryann Coraluzzo	No	Tax Collector	01/01/2007	Approved	01/01/2022						Approved
Buena Borough	Cynthia Holland	Yes	Treasurer	10/01/2013	Approved							Approved
Buena Borough	Dawn Michelle Allen	No	Tax Collector	01/01/2022	Approved	03/31/2022						Approved
Buena Borough	Patrick Hegarty	Yes	Tax Collector	04/11/2022	Approved							Approved
Cape May City	Neil Young	No	Treasurer	09/30/2013	Approved	05/03/2023						Approved
Cape May City	Joann Bradley	No	Tax Collector	02/07/2017	Approved	01/01/2019						Approved
Cape May City	Bruce A. MacLeod	No	Tax Collector	08/20/2007	Approved	02/07/2017						Approved
Cape May City	Deborah Lindholm	Yes	Tax Collector	01/01/2019	Approved							Approved
Cape May City	Kevin Hanie	Yes	CFO (Assuming Treasurer Duties)	05/03/2023	Approved							Approved
Cape May Point Borough	James Craft	Yes	Treasurer	01/01/2013	Approved							Approved
Cape May Point Borough	David Carrick	Yes	Utility Clerk	02/25/2014	Approved							Approved
Cape May Point Borough	Susan Jackson	No	Tax Collector	12/31/2007	Approved	03/01/2018						Approved
Cape May Point Borough	Kimberly Stevenson	Yes	Tax Collector	03/01/2018	Approved							Approved
Commercial Township	Leslie A. Kraus	Yes	Tax Collector	09/01/2010	Approved							Approved
Deerfield Township	Maria Schiano Branson	Yes	Tax Collector	06/01/2009	Approved							Approved
Deerfield Township	Lorraine Boyer	No	CFO (Assuming Treasurer Duties)	02/19/2014	Approved	01/01/2020						Approved
Deerfield Township	Cynthia Holland	Yes	CFO (Assuming Treasurer Duties)	01/01/2020	Approved							Approved
Dennis Township	Monica Heim	Yes	Tax Collector	02/02/2020	Approved							Approved
Dennis Township	Jennifer McIver	No	CFO (Assuming Treasurer Duties)	08/01/2018	Approved	05/31/2018						Approved
Dennis Township	Jessica Bishop	Yes	CFO (Assuming Treasurer Duties)	05/31/2018	Approved							Approved
Dennis Township	Lisa Garrison	No	Tax Collector	03/01/2019	Pending	08/17/2021						Pending
Downe Township	Jennafer Hernandez	Yes	Tax Collector	01/01/2009	Approved							Approved
Estell Manor City	Judson Moore	Yes	CFO (Assuming Treasurer Duties)	01/01/2008	Approved							Approved
Estell Manor City	Terence S Graff	Yes	Tax Collector	04/04/2012	Approved							Approved
Folsom Borough	Bertha Cappuccio	No	Tax Collector	01/01/2007	Approved	04/01/2022						Approved
Folsom Borough	Dawn Stollenwerk	Yes	CFO (Assuming Treasurer Duties)	01/01/2018	Approved							Approved
Folsom Borough	Renee DeSalvo	Yes	Tax Collector	04/01/2022	Approved							Approved
Galloway Township	Christian Johansen	Yes	Tax Collector	07/01/2014	Approved							Approved
Galloway Township	Kristen Manning	Yes	Treasurer	03/09/2015	Approved							Approved
Hamilton Township	Renee DeSalvo	Yes	Tax Collector	01/01/2007	Approved							Approved
Hamilton Township	Dorothy Gallagher	No	CFO (Assuming Treasurer Duties)	01/01/2020	Approved	01/01/2021						Approved
Hamilton Township	Cynthia Lindsay	Yes	CFO (Assuming Treasurer Duties)	01/01/2021	Approved							Approved
Linwood City	Kacey Johnson	No	Tax Collector	09/29/2015	Approved	10/13/2017						Approved
Linwood City	Albert Stanley	No	Tax Collector	06/02/2014	Approved	07/31/2015						Approved
Linwood City	Silvia Washington	No	Tax Collector	10/18/2021	Incomplete	10/18/2021						Incomplete
Longport Borough	Pamela Tomassi	Yes	Tax Collector	01/01/2016	Approved							Approved
Longport Borough	Donna O'Brien	No	Tax Collector	02/02/2015	Approved	01/01/1900						Approved
Longport Borough	Patricia C. English	No	Treasurer	01/01/2019	Approved	11/01/2023						Approved
Longport Borough	Jenna Kelly	Yes	CFO (Assuming Treasurer Duties)	11/01/2006	Approved							Approved
Longport Borough	Joanne Clayton	Yes	Library Treasurer	11/01/2023	Approved							Approved

# MEL STATUTORY BONDS as of 4/3/24

Name	Applicant	Active Statutory Bond	Bond Position 1	Effective Date	Position 1 Status	Position 1 Delete Date	Position 1 Condition	Bond Position 2	Effective Date	Position 2 Status	Position 2 Delete Date	Position 2 Status
Lower Township	Lauren Read	Yes	CFO (Assuming Treasurer Duties)	11/01/2007	Approved							Approved
Lower Township	Susan Jackson	No	Tax Collector	11/01/2007	Approved	03/01/2018						Approved
Lower Township	Kathleen L. Brown	Yes	Tax Collector	03/01/2018	Approved							Approved
Lower Township	Bruce A Macleod	No	Tax Collector	09/04/2018	Approved	06/01/2019						Approved
Margate City	Linda A. Morgan	No	Tax Collector	01/01/2015	Approved	09/01/2020						Approved
Margate City	Lisa McLaughlin	Yes	CFO (Assuming Treasurer Duties)	01/01/2015	Approved							Approved
Margate City	Tara Mazza	Yes	Tax Collector	09/01/2020	Approved							Approved
Middle Township	Sandra Beasley	Yes	Tax Collector	06/30/2007	Approved							Approved
Middle Township	Susan Anastasio-Quinones	No	CFO (Assuming Treasurer Duties)	08/15/2016	Approved	12/31/2021						Approved
Middle Township	John L. Clifford, Jr.	No	CFO (Assuming Treasurer Duties)	12/24/2014	Approved	08/15/2016						Approved
Middle Township	David Elliott	No	CFO (Assuming Treasurer Duties)	01/01/2022	Approved	01/01/2023						Approved
Middle Township	Francine Springer	No	CFO (Assuming Treasurer Duties)	09/09/2022	Approved	12/31/2022						Approved
Middle Township	Neil Young	Yes	CFO (Assuming Treasurer Duties)	01/01/2023	Approved							Approved
Millville City	Sherril J. Ball	No	Tax Collector	07/01/2010	Approved	03/01/2018						Approved
Millville City	Marcella D Shepard	No	CFO (Assuming Treasurer Duties)	01/01/2018	Approved	12/31/2023						Approved
Millville City	Tracey L Gregoire	Yes	Tax Collector	03/01/2018	Approved							Approved
Millville City	Susan Quinones	Yes	CFO (Assuming Treasurer Duties)	01/01/2024	Approved							Approved
Mullica Township	Bertha Cappuccio	No	Tax Collector	01/01/2007	Approved	03/31/2022						Approved
Mullica Township	Dawn Stollenwerk	Yes	CFO (Assuming Treasurer Duties)	01/01/2019	Approved							Approved
Mullica Township	Sharon Riley	No	Tax Collector	04/01/2022	Approved	12/31/2023						Approved
Mullica Township	Corie Hendrickson	Yes	Tax Collector	01/01/2024	Approved							Approved
Newfield Borough	Robert E. Scharle	Yes	CFO (Assuming Treasurer Duties)	01/01/2007	Approved							Approved
Newfield Borough	Kathleen K. Rivers-Rambone	No	Tax Collector	01/01/2015	Approved	12/15/2016						Approved
Newfield Borough	Lawrence J. Nightlinger Jr.	No	Tax Collector	01/01/2008	Approved	02/12/2020						Approved
Newfield Borough	Maria Schiano Branson	No	Tax Collector	12/15/2016	Approved	02/01/2020						Approved
Newfield Borough	Mark Godfrey	Yes	Tax Collector	02/13/2020	Approved							Approved
North Wildwood City	Todd N. Burkey	Yes	CFO (Assuming Treasurer Duties)	01/01/2013	Approved							Approved
North Wildwood City	Todd N. Burkey	Yes	Tax Collector	08/16/2007	Approved							Approved
Northfield City	Dawn Stollenwerk	Yes	CFO (Assuming Treasurer Duties)	02/15/2012	Approved							Approved
Northfield City	Cynthia L. Stafford	No	Library Treasurer	06/29/2016	Approved	06/26/2020						Approved
Northfield City	Michele L. Kirtsos	No	Tax Collector	10/05/2015	Approved	09/07/2022						Approved
Northfield City	Cindy A. Ruffo	No	Tax Collector	05/10/2007	Approved	10/05/2015						Approved
Northfield City	Elaine Meglathery	No	Library Treasurer	11/08/2007	Approved	06/19/2016						Approved
Northfield City	Melanie Brozosky	No	Library Treasurer	06/26/2020	Approved	03/16/2023						Approved
Northfield City	Laura Cohen	Yes	Tax Collector	09/07/2022	Approved							Approved
Northfield City	Wayne Palaia	Yes	Library Treasurer	03/16/2023	Approved	Advanced						Approved
Ocean City	Terence S Graff	Yes	Tax Collector	02/23/2015	Approved							Approved
Ocean City	Frank Donato III	Yes	CFO (Assuming Treasurer Duties)	01/01/2010	Approved							Approved
Ocean City	Constance Jenkins Pritchard	Yes	Library Treasurer	01/01/2016	Approved							Approved
Ocean City	Jon D. Batastini	No	Library Treasurer	01/14/2013	Approved	09/03/2015						Approved
Pleasantville City	Flor Roman	Yes	Tax Collector	01/01/2007	Approved							Approved
Pleasantville City	Barry Ludy	Yes	Treasurer	03/04/2013	Approved							Approved
Sea Isle City	Paula G. Doll	No	Tax Collector	01/01/2007	Approved	02/01/2022	Yes	Assuming Treasurer	07/01/2010		02/01/2022	Approved
Sea Isle City	Maureen Conte	Yes	Tax Collector	02/08/2022	Approved							Approved
Sea Isle City	Jennifer McIver	Yes	CFO (Assuming Treasurer Duties)	03/07/2022	Approved							Approved

# MEL STATUTORY BONDS as of 4/3/24

Name	Applicant	Active Statutory Bond	Bond Position 1	Effective Date	Position 1 Status	Position 1 Delete Date	Position 1 Bond Position 2	Position 2 Effective Date	Position 2 Status	Position 2 Delete Date	Position 2 Status
Somers Point City	William E. Swain	No	CFO (Assuming Treasurer Duties)	03/22/2014	Approved	12/31/2020					Approved
Somers Point City	Lisa King	Yes	Tax Collector	01/01/2015	Approved		Yes	Utility Clerk	01/01/2015	Approved	Approved
Somers Point City	Shana Kestrel	Yes	CFO (Assuming Treasurer Duties)	01/01/2021	Approved						Approved
Stone Harbor Borough	James Craft	Yes	Treasurer	05/05/2014	Approved						Approved
Stone Harbor Borough	Deborah Candelore	Yes	Tax Collector	04/01/2011	Approved						Approved
Upper Deerfield Township	Andrea A. Penny	No	Tax Collector	01/01/2007	Approved	09/30/2020					Approved
Upper Deerfield Township	Amy L. Colaneri	Yes	Treasurer	07/01/2009	Approved						Approved
Upper Deerfield Township	Janeen Rossi	Yes	Tax Collector	10/01/2020	Approved						Approved
Upper Township	Barbara Ludy	Yes	Treasurer	06/23/2008	Approved						Approved
Upper Township	Rhonda L. Sharp	Yes	Tax Collector	07/01/2009	Approved						Approved
Ventnor City	Pamela Tomassi	No	Tax Collector	10/21/2016	Approved	01/01/2018					Approved
Ventnor City	Adetoro O. Aboderin	No	Treasurer	01/01/2009	Approved	02/18/2019					Approved
Ventnor City	Julie Harron	No	Tax Collector	04/01/2008	Approved	06/01/2016					Approved
Ventnor City	Margaret Pacanowski	Yes	Tax Collector	01/01/2018	Approved						Approved
Ventnor City	Albert Stanley	No	CFO (Assuming Treasurer Duties)	01/24/2019	Approved	12/31/2023					Approved
Ventnor City	Amy Stover	Yes	CFO (Assuming Treasurer Duties)	11/21/2023	Approved						Approved
Waterford Township	Anita M. Wilson	No	Tax Collector	01/01/2009	Approved	12/31/2020					Approved
Waterford Township	Francine Grubb	No	Library Treasurer	07/01/2017	Approved	12/31/2021					Approved
Waterford Township	Brian Pollock	No	Library Treasurer	06/24/2009	Approved	07/01/2017					Approved
Waterford Township	Maria Yeatman	No	Library Treasurer	01/01/2016	Approved	06/30/2017					Approved
Waterford Township	Stacia Regn	No	Treasurer	02/01/2020	Approved	09/01/2022					Approved
Waterford Township	Lisa Eggert	Yes	Tax Collector	01/01/2021	Approved						Approved
Waterford Township	Dorene Szeker	No	Library Treasurer	04/01/2022	Approved	06/30/2022					Approved
Waterford Township	Carl Lange	Yes	Library Treasurer	06/30/2022	Approved						Approved
Waterford Township	Dawn Sayers	Yes	Treasurer	01/01/2023	Approved						Approved
West Cape May Borough	Todd N. Burkey	Yes	Tax Collector	01/01/2009	Approved						Approved
West Cape May Borough	Frank Donato III	Yes	CFO (Assuming Treasurer Duties)	06/01/2009	Approved						Approved
West Cape May Borough	David S. Carrick	Yes	Utility Clerk	01/01/2007	Approved						Approved
West Wildwood Borough	Elaine Brunkel-Crowley	Yes	CFO (Assuming Treasurer Duties)	03/04/2011	Approved						Approved
West Wildwood Borough	Terence S Graff	Yes	Tax Collector	07/01/2012	Approved						Approved
West Wildwood Borough	Maureen Mitchell	No	Tax Collector	03/04/2011	Approved	07/12/2016	Yes	Utility Clerk	03/04/2011	Approved	07/12/2016
Weymouth Township	Debra A. D'Amore	Yes	Tax Collector	01/01/2007	Approved						Approved
Wildwood City	Donna Dennis	No	Utility Clerk	06/28/2011	Approved	11/01/2022					Approved
Wildwood City	Jeanette J Powers	No	CFO (Assuming Treasurer Duties)	01/27/2007	Approved	03/01/2021					Approved
Wildwood City	Lori J. Rosensteel	Yes	Tax Collector	09/01/2012	Approved						Approved
Wildwood City	Susan Plaza	Yes	CFO (Assuming Treasurer Duties)	07/14/2021	Approved						Approved
Wildwood City	Colleen Walsh	Yes	Utility Clerk	11/02/2022	Approved						Approved
Wildwood Crest Borough	Alicia Belansen	No	CFO (Assuming Treasurer Duties)	10/07/2013	Approved	06/20/2018					Approved
Wildwood Crest Borough	Lyndsey Herman	Yes	Tax Collector	03/30/2015	Approved						Approved
Wildwood Crest Borough	Francine B Springer	Yes	CFO (Assuming Treasurer Duties)	06/20/2018	Approved						Approved
Woodbine Borough	John H. Miller	No	CFO (Assuming Treasurer Duties)	01/01/2014	Approved	08/21/2019					Approved
Woodbine Borough	Lisa Garrison	No	Tax Collector	07/01/2007	Approved	07/25/2022					Approved
Woodbine Borough	James Craft	Yes	CFO (Assuming Treasurer Duties)	05/01/2019	Approved						Approved
Woodbine Borough	Alexander Bauer	Yes	Tax Collector	03/05/2022	Approved						Approved

**Atlantic County Municipal Joint Insurance Fund  
Skateboard Park Approval Status**

<b>Member Municipality</b>	<b>Stage</b>	<b>Status</b>	<b>Notes</b>
Absecon			
Avalon	Removed	Removed	Park Equipment Removed 6/2017
Brigantine	Approved	Complete	
Buena	General Inquiry	Inactive	The Executive Director/Safety Director are unaware of any ongoing activity
Cape May			
Cape May Point			
Commercial	Approved	Complete	
Deerfield			
Dennis			
Downe			
Estell Manor			
Folsom			
Galloway	Removed	Removed	Park Equipment Removed
Hamilton	Removed	Removed	Park Equipment Removed as of 11/1/08
Linwood			
Longport			
Lower	Removed	Removed	Park Equipment removed as of 4/26/07
Margate	Planning	Inactive	The Executive Director/Safety Director are unaware of any ongoing activity
Middle	Removed	Removed	Removed effective 2/27/2018
Millville			
Mullica		Removed	Park Equipment removed as of 11/5/09
Newfield			
North Wildwood	Approved	Complete	
Northfield			
Ocean City	Approved	Complete	
Pleasantville			
Sea Isle City	Approved	Complete	
Somers Point			
Stone Harbor	Approved	Complete	
Upper Deerfield			
Upper Twp.	Approved	Complete	
Ventnor			
Waterford			
West Cape May			
West Wildwood			
Weymouth			
Wildwood			
Wildwood Crest			
Woodbine			

## Appellate Division Rules That Claimants in Certain Circumstances Do Not Have to Reimburse an Employer's Lien From a Third Party Recovery Until the End of the Workers' Compensation Case

John H. Geaney March 25, 2024

The unreported case of **New Jersey Transit Corp. v. Joseph**, No. A-1194-22 (App. Div. March 19, 2024) has thrown a wrench into the common understanding of when to resolve third party liens in New Jersey. The facts that are supplied in the case are not detailed. Darshelle Joseph was injured on October 23, 2019, during the course of his employment with New Jersey Transit. The opinion notes that NJ Transit's carrier notified Joseph on November 11, 2019, of its lien rights as to any third party recovery. The letter also advised Mr. Joseph to contact the carrier if he should retain an attorney in a third-party case. The Appellate Division observed that there was no indication in the record whether Mr. Joseph notified either NJ Transit or its carrier of the third-party action, nor does the opinion discuss what, if anything, the third party attorney knew about NJ Transit's lien when the third party case settled.

NJ Transit paid \$7,112.90 in workers' compensation medical and temporary disability benefits to petitioner, Darshelle Joseph. The workers' compensation case had not yet been resolved. Mr. Joseph sued the tortfeasor and recovered \$14,000 in settlement with his uninsured motorist insurance policy in December 2021. His attorney disbursed the full \$14,000 settlement amount less counsel fees and costs of \$15.10 to Mr. Joseph. No repayment was made to the New Jersey Transit for its medical and temporary disability benefits lien as of the date of the third party settlement.

NJ Transit filed a verified complaint in civil court seeking reimbursement of its statutory lien. It is noted in the decision that the trial court did not hear oral arguments but ruled on the briefs submitted, denying NJ Transit's application for lien reimbursement as being "premature."

The trial court and Appellate Division disagreed with NJ Transit's argument that the employer's statutory lien must be satisfied immediately upon resolution of the third-party settlement. The Appellate Division said, "Thus, the statute makes no mention of when the employer's lien must be satisfied, but it makes clear the specific amount of the lien cannot be determined until the employer's liability is finalized." The Court was referring to N.J.S.A. 34:15-40(b) which states:

b) If the sum recovered by the employee ... from the third person ... is equivalent to or greater than the liability of the employer ... under this statute, the employer ... shall be released from such liability and shall be entitled to be reimbursed ... for the medical expenses incurred and compensation payments theretofore paid to the injured employee ... less employee's expenses of suit and attorney's fee as hereinafter defined.

The Court read the above paragraph as being directly applicable to this case because the \$14,000 civil recovery was higher than the \$7,112.90 paid in medical and temporary disability benefits but the court also noted that the workers' compensation case had not yet concluded. The Court said, "*Thus, there is no requirement the employer's lien must be paid following recovery from a third-party tortfeasor. Indeed, it cannot be fully satisfied until any associated workers' compensation action is finalized and the employer's liability under the Act is determined. Thus, an employer's unperfected statutory lien is not required to be satisfied immediately upon the injured employee's recovery from a third-party tortfeasor.*"

The comment that the Court made about an "unperfected lien" is important to understand for all workers' compensation practitioners. The Court was referring to N.J.S.A. 34:15-40(d), which provides that the employer or its carrier may serve notice on the third-party defendant or its insurance carrier of its lien rights as to any third-party recovery arising from the work injury. When that notice is provided, the third-party defendant or its insurance carrier may not make settlement payments to the injured employee in the civil action until the workers' compensation lien is satisfied. This notice provision is what the Court meant by "perfection" of lien rights. The Court said that in this case, there was no proof of any perfection of lien rights.

Current practice in New Jersey is contrary to this decision. When a third-party settlement occurs – even if the workers' compensation case is ongoing – the lien is resolved as to the amount of the third-party recovery. In a case like this, the third-party attorney would repay two thirds of \$7,112.90 minus statutory costs, and then the employee would continue to pay one third of future benefits until the amount of the workers' compensation benefits would reach \$14,000 (which was the amount of the UM settlement). Thereafter the employer would pay dollar for dollar on any future benefits. The employer is not actually paying workers' compensation benefits up to the amount of the \$14,000 settlement. Rather the employer is making its contribution to plaintiff's counsel fee in the third party case.

The Court acknowledged that the underlying principle behind N.J.S.A. 34:15-40 was to prevent double recoveries. In this case the plaintiff made a double recovery because he received his \$7,112.90 and kept two thirds of the \$14,000 UM settlement. The Court seemed to be suggesting that this problem of double recovery could be addressed at the end of the workers' compensation case depending on how much more money NJ Transit has to pay to resolve the workers' compensation claim. The flaw in that argument is that if NJ Transit should close the file with only a few thousand more dollars in payments, a double recovery will occur and NJ Transit will not receive repayment of its lien.

The Appellate Division was concerned about the fact that NJ Transit's lien was not protected in this case because the entire \$14,000 settlement was disbursed without holding funds in escrow to satisfy the lien. It said, "As long as the funds to pay the lien are protected – either deposited into court or deposited in an attorney trust account –

there is no prejudice to NJ Transit.” The Court remanded the case to the trial court to take steps to protect NJ Transit’s lien. None of this would have been necessary had the lien been taken care of at the time of the third party settlement.

This case is focused on an important issue: namely, the timing of lien repayments when a third-party settlement occurs during an unresolved and ongoing workers’ compensation case. The general principles discussed in this case are far more important to focus on than the outcome in this Appellate Division case because the record here is so sparse. The opinion does not mention what contact there was, if any, between plaintiff and his lawyer and NJ Transit before the third-party settlement funds were disbursed.

We all know that third-party settlements occur all the time during ongoing workers’ compensation cases. The Court correctly observed that “perfected” liens must be repaid to the employer at the time of the third-party settlement if notice has been given to the third-party defendant or its carrier of the employer’s lien rights. In that situation, there can be no attempt to delay repayment until the end of the workers’ compensation case. Now let’s consider so-called unperfected liens where the third-party defendant and its carrier are not notified of lien rights before they disburse payments. If both plaintiff’s attorney and the plaintiff have actual notice of the employer’s lien rights at the time of settlement of the third-party case, why would the result be different? Why would there be an opportunity to delay repayment until the workers’ compensation case should end – which might be several more years? It is the actual notice that should matter. It would be inconsistent to read the statute to mean that a lawyer and plaintiff with actual notice of the current lien amount should be held to a different legal standard than a third-party defendant or its carrier with respect to the timing of reimbursement.

## A Brief History of the New Jersey Workers’ Compensation Act

John H. Geaney April 3, 2024

For those who do not like workers’ compensation, blame Otto Von Bismarck. Yes, the man known as the Iron Chancellor, who united all the kingdoms and states into one Germany, passed the first modern workers’ compensation law in 1874. Other western European nations soon followed, and between 1911 and 1920 every state in America adopted a workers’ compensation law, all of which borrowed from Bismarck’s first modern law. On April 4, 2024, New Jersey marks its 113<sup>th</sup> year of workers’ compensation. Wisconsin was the first state to pass a workers’ compensation law in 1911. Nine more states, including New Jersey, followed in 1911.

The significance of having a workers’ compensation law can only be appreciated if you consider how injuries were treated before 1911. Former Director of the Division of Workers’ Compensation, Peter Calderone, wrote an excellent article in 2011 explaining what life was like before modern workers’ compensation laws. If an employee’s injury was caused by his own negligence, or by a co-employee’s negligence or was just a fact



of business life, the employer paid no workers' compensation benefits. That meant no medical treatment was offered, no lost wages and no benefits were voluntarily paid. Fault was the main defense in all cases. Work injuries quickly led to impoverishment for families.

Since there was no workers' compensation law until 1911, injured workers would hire litigation lawyers who would sue the employer for medical care and damages. Courts in every state were jam packed with thousands of such cases. Employers would sometimes win the suits and sometimes lose and pay high jury awards. The process was slow and both labor groups and employers were unhappy with the system.

While Bismarck may have started the concept of the modern workers' compensation law, New Jersey owes its own unique version of workers' compensation law mostly to one man named Walter Edge, who grew up in Pleasantville, Atlantic County, New Jersey and who started his first newspaper as a ten-year-old boy. At age 17, he purchased the Dorland Agency, an advertising business, and turned it into an international advertising company with offices in the United States and Europe. He founded the Atlantic City Press at age 22, which he sold for an enormous profit. He got into politics at age 21. He was elected to the Assembly at age 36 in 1909 and became a state senator in 1910. Edge was so passionate about creating a New Jersey workers' compensation law that he traveled to Germany and other western European countries to learn how each country's system worked. When he returned from Europe, he had in his mind a plan for a New Jersey workers' compensation law.

Edge sponsored the first New Jersey workers' compensation law in 1911 and lobbied colleagues in both parties to support it. The legislation would take workers' compensation out of civil courts and create an administrative remedy. Edge wrote in 2011: "It is generally conceded that 20 per cent of all litigation today, clogging the machinery of our courts, consists of suits between employer and employee." The legislation was passed with bipartisan support in the Assembly and Senate on April 3, 1911, and then signed into law on April 4, 1911 by Governor Woodrow Wilson.

New Jersey labor groups hailed the law's main features, which were to eliminate fault as an issue for receiving compensation benefits and to provide prompt medical benefits after an injury along with temporary disability and partial permanent disability benefits in certain cases. Edge wrote in 1911, ". . . *American citizenship and humanity does not allow an injured man to walk about the streets uncared for; as, at great expense, the public is maintaining, mainly through charity, many institutions to properly look after unfortunate people. The public is paying the bill.*" Provisions also covered permanent and total disability benefits and dependency benefits. In return for agreeing to a no-fault system, employers received what they wanted. That was an end the right of an employee to sue

his or her employer or co-employee in civil court. This provision is referred to as the “exclusive remedy.”

Walter Edge would go on to pass many other laws that made a difference to New Jersey residents — both labor groups and employers. When North and South Jersey could not agree on major capital projects, he managed to forge a compromise that would lead to the construction of the Ben Franklin Bridge and the Holland Tunnel. He became an early ally of Enoch “Nucky” Johnson (the character on whom “Boardwalk Empire’s” Nucky Thompson was based). In fact, Johnson became Edge’s campaign manager for Governor in 1916. Johnson was a Republican power broker in Atlantic County, and Edge was also able to get the support of the state’s leading Democrat, Mayor Frank Hague of Hudson County fame. Hague thought the Democratic candidate too liberal for his tastes. Edge won and became Governor, eventually serving two terms as Governor of New Jersey, separated by 25 years. What does this biographical history of Walter Edge have to do with workers’ compensation? Not much, but perhaps consider this a minor deviation.

From 1911 to 1979, there really were few changes to the New Jersey Workers’ Compensation Act. Walter Edge’s vision of workers’ compensation in 1911 has stood the test of time. There has only been one major overhaul of New Jersey’s law, and that took place in 1979. The overhaul was necessary because New Jersey’s benefit rates were extremely low and were not keeping up with inflation. An award of 50% permanent partial disability amounted to only \$11,000 in 1979. Even back then, that was not a lot of money. In 1980 the same award more than tripled to \$36,900. Today an award of 50% permanent partial disability for a high wage earner amounts to over \$226,000. For their part, employers were unhappy with the endless exceptions to the going-and-coming rule and the unpredictable standards for occupational disease claims and also lobbied for change in 1979. The Legislature passed dozens of major changes to the Act including the following:

1. Significant rate hikes for temporary disability and permanent partial disability benefits starting in 1980;
2. Tightening the standards for occupational disease claims to include the requirement that the petitioner show proof of a medical condition that is produced by causes which are characteristic of or peculiar to work in a material degree;
3. Creating more stringent medical/legal requirements for cardiovascular and cerebrovascular claims;
4. Requiring proof by objective medical evidence to support any claim for permanent partial disability and eliminating awards based solely on subjective complaints;
5. Narrowing the countless exceptions to the former “going-and-coming rule” and adopting the “premises rule” instead.

Following these and many other amendments, the Supreme Court weighed in on its interpretation of key provisions passed in 1979, including **Perez v. Pantasote**, **Hellwig v. J. F. Rast & Co., Inc.**, **Saunderlin v. E.I. DuPont Co.**, and **Jumpp v. City of Ventnor**.

Where does New Jersey workers' compensation stand today, 113 years after Walter Edge wrote the first workers' compensation law in the state? It remains very much where it stood in 1911 as buttressed by the 1979 amendments. If one were to list the five main pillars of the New Jersey Workers' Compensation Act that differentiate our law from that of other states, they would be these:

- A. Permanent partial disability benefits even for workers who are able to return to their job on a full-time basis with no restriction so long as they have proof of a substantial limitation of non-work activities;
- B. The absence of any medical fee schedule;
- C. Employer-directed medical care;
- D. The employer's right to terminate medical and temporary disability benefits at MMI;
- E. The right of an injured worker to reopen his or her case for further medical, temporary and permanent disability benefits.

All these aspects of the law were set in motion in 1911. Other states have several of these features in their law, but no other state has all five of them. The state that is closest to New Jersey's system is Missouri. Perhaps because Walter Edge was a moderate politician who routinely reached out to both sides of the political aisle throughout his career, he was able to craft legislation that offered advantages to both employees and employers. Neither employers nor employees like every aspect of the New Jersey law. Few can dispute, however, that New Jersey has a better social policy behind its law. The overwhelming majority of injured workers do return to work. The New Jersey Act has its critics. One of the most serious criticisms is that New Jersey has the highest workers' compensation medical costs in the nation. Overall, however, the New Jersey Act is more balanced than workers' compensation laws of most states and remains true to the spirit of the original 1911 law.

## Land Use Training Certification

### Member

Avalon  
Buena  
Cape May Point  
City of Cape May  
Commercial Twp.  
Deerfield  
Dennis  
Downe  
Estell Manor  
Folsom  
Galloway  
Hamilton  
Linwood  
Longport  
Margate  
Middle  
Millville  
Mullica  
North Wildwood  
Northfield  
Sea Isle City  
Somers Point  
Stone Harbor  
Upper Deerfield  
Upper Township  
Ventnor  
Waterford  
West Cape May  
Weymouth  
Wildwood  
Wildwood Crest  
Woodbine

## April 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11 9:00 AM – ACM Claims Comm Mtg – Microsoft Teams	12	13
14	15	16	17 3:00 PM – ACM Exec. Comm Mtg – Atlantic County Library – Mays Landing	18	19	20
21	22	23	24	25	26	27
28	29	30 10:00 AM – ACM EPL/Tech comm Mtg – Middle Twp Muni Bldg				

## May 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7 9:30AM – RCF/MEL Claims Mtg – Virtual  2:00 PM – ACM Strategic Plng Mtg – Weymouth Twp	8	9 9:00 AM – ACM Claims Comm Mtg – Microsoft Teams	10	11
12	13	14	15 3:00 PM – ACM Exec C omm Mtg – Micorsoft Teams	16 11:30 AM – ACM Safety Comm Mtg – Microsoft Teams	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31 9:00 AM – ACM Finance Comm Mtg – Folsom Muni Bldg	



TO: Elected Officials, Fund Commissioners, & Municipal Clerks, ACM, BURLCO, & TRICO JIFs  
FROM: Paul A. Forlenza, MGA, RMC, Executive Director  
DATE: January 4, 2024  
RE: **2023 -2024 Elected Officials Training Invitation**

\*\*\*\*\*

For more than 20 years, the ACM, BURLCO, & TRICO JIFs have offered our elected officials the opportunity to participate in annual voluntary training. The 2023-2024 Elected Officials Training will take place online via the MEL Safety Institute (MSI). This 45-minute training video provides important information on the challenges facing local elected leaders in managing local government risks and tools available to assist our members. Instructions on how to access this training are attached.

The online training format allows for participation by all our elected officials, and the convenience of completing this training when their schedule permits, prior to the May 1, 2024 deadline. By utilizing the MEL Safety Institute, my office will be able to better track the completion of the training and document the credits due to members' assessments.

Within a week or so of completing the online training, those that complete the course will receive an email from my office highlighting the various risk management programs discussed during the training and how they can be accessed by our members.

Please remember that for every elected official that completes the training, their municipality will earn a \$250 credit towards your municipality's 2024 MEL Assessment (capped at 5% of your 2024 MEL Assessment). Also, your highest ranking administrative official is eligible to earn this credit by completing the course.

On a final note, if you attended the Elected Officials Training at the League of Municipalities in November 2023, you will receive credit for the training.

Thank you for your attention to this matter. As always, please feel free to contact me should you have any questions.

File: MEL/2024/Elected Officials Training Tab: Initiation

# 2023-2024 ELECTED OFFICIALS RISK MANAGEMENT SEMINAR



This seminar is designed to provide a general understanding of the legal principles pertaining to governmental operations. Municipal Elected Officials, Authority Commissioners, and a member's Chief Executive Officer (i.e., Municipal Manager/Administrator or Executive Director) who completes this course by May 2024 may qualify for a \$250 credit (capped at approx. 5% of MEL assessment) in their local unit 2024 assessment.

## Login to LMS

1. Click to access the [MSI Learning Management System](#).
2. If you have previously taken MSI classes, enter your username and password.
3. If you are new or do not know your username/password, check with your Training Administrator, or call the MSI Help Line at (866) 661-5120.
4. Click the [Request Training button](#) on the top right of your [Home Screen](#).
5. Select the check box to the right of the course [2023-2024 Elected Officials Risk Management Seminar](#).
6. Scroll to the bottom of the page to submit your selection.
7. The course now shows in the [Assigned](#) section of your [Home Screen](#).
8. Click the program name to launch the course.
9. Upon completion of the course, a screen with your [Certificate of Completion](#) will appear and can be printed.
10. The course and certificate will now appear in the [Completed](#) section of your Home Screen. Learning transcripts are automatically updated in the MEL Safety Institute's Learning Management System.

If you have questions or need assistance, contact the [Andrea Felip at 856-552-4740](#) or [afelip@jamontgomery.com](mailto:afelip@jamontgomery.com).



**2024 ACM Meeting Attendance**

Municipality	Name	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	# FC Attended	#ALT Attended	Total Meetings	% FC Attended	%ALT Attended	Combined Attendance
<b>(Mtg Occurred=Y)</b>		Y	Y	Y												3			
Absecon	Lovallo/Thompson	N/A	FC	FC										2	0	3	67%	0%	67%
Avalon	Wahl/Waldron	FC	FC	N/A										2	0	3	67%	0%	67%
Brigantine	O'Neill/Blowers	FC	Alt	N/A										1	1	3	33%	33%	67%
Buena Boro	Nimohay/Jones	FC	FC	FC										3	0	3	100%	0%	100%
Cape May	Dietrich/Burke	N/A	FC	FC										2	0	3	67%	0%	67%
Cape May Point	Grant/Redington	N/A	FC	FC										2	0	3	67%	0%	67%
Commercial Twp	Miller/Horseman	FC	FC	FC										3	0	3	100%	0%	100%
Deerfield	Bascelli/Seifrit	N/A	FC	FC										2	0	3	67%	0%	67%
Dennis	Bishop/Justice	FC	FC	FC										3	0	3	100%	0%	100%
Downe	Campbell, B./Lockley	N/A	Alt	N/A										0	1	3	0%	33%	33%
Estell Manor	Marcolongo./Masker	N/A	FC	FC										2	0	3	67%	0%	67%
Folsom	Gatto/Schenker	FC	FC	FC										3	0	3	100%	0%	100%
Galloway	Parks/Spinelli	FC	FC	FC										3	0	3	100%	0%	100%
Hamilton	Pollock/Noll	FC	FC	N/A										2	0	3	67%	0%	67%
Linwood	Napoli/Strazzeri	FC	FC	Alt										2	1	3	67%	33%	100%
Longport	Tomassi/Kelly	FC	FC	FC										3	0	3	100%	0%	100%
Lower	Fournier/Ridgway	N/A	FC	FC										2	0	3	67%	0%	67%
Margate	Adams/Power	Alt	FC	Alt										1	2	3	33%	67%	100%
Middle	Keun/Schumann	FC	FC	FC										3	0	3	100%	0%	100%
Millville	Calchi/Shapiro	N/A	FC	FC										2	0	3	67%	0%	67%
Mullica	Stollenwerk	N/A	FC	FC										2	0	3	67%	0%	67%
Newfield	Marandino	N/A	N/A	N/A										1	0	3	33%	0%	33%
North Wildwood	vanSant	N/A	FC	FC										2	0	3	67%	0%	67%
Northfield	Canesi/Campbell	N/A	FC	FC										2	0	3	67%	0%	67%
Ocean City	Woods/Wood	FC	FC	FC										3	0	3	100%	0%	100%
Pleasantville	Williams/Stewart	Alt	FC	Alt										1	2	3	33%	67%	100%
Sea Isle	Seib/Savastano	FC	FC	FC										3	0	3	100%	0%	100%
Somers Point	Samuelsen/Heath	FC	Alt	FC										2	1	3	67%	33%	100%
Stone Harbor	Craft/McGonagle	N/A	FC	FC										2	0	3	67%	0%	67%
Upper Deerfield	Spoltore/Vagnarelli	FC	FC	FC										3	0	3	100%	0%	100%
Upper Township	DeMarzo/Trout	N/A	FC	Alt										1	1	3	33%	33%	67%
Ventnor	Pacanowski/Iannuzzelli	FC	FC	FC										3	0	3	100%	0%	100%
Waterford	Dougherty/Regn	N/A	FC	FC										2	0	3	67%	0%	67%
West Cape May	Dick/Vitelli	FC	FC	FC										3	0	3	100%	0%	100%
West Wildwood	Segrest, Joe/O'Hala	FC	FC	FC										3	0	3	100%	0%	100%
Weymouth	Ayres/Seelman	N/A	Alt	Alt										0	2	3	0%	67%	67%
Wildwood City	Dunn/Pinto	FC	FC	FC										3	0	3	100%	0%	100%
Wildwood Crest	Mahon/Feketics	N/A	FC	FC										2	0	3	67%	0%	67%
Woodbine	Boyd/Gurdgiel	N/A	FC	FC										2	0	3	67%	0%	67%
<b>39</b>		21	38	34	39	39	39	39		39	39	39	39	83	11	117	71%	9%	80%
		54%	97%	87%	100%	100%	100%	100%		100%	100%	100%	100%						

N/A	No representation for this municipality
FC	Fund Commissioner in attendance
ALT	Alt. Fund Commissioner in attendance

## Atlantic County Municipal Joint Insurance Fund

**TO:** Fund Commissioners, Safety Coordinators, and Risk Managers  
**FROM:** Robert Garish, JIF Safety Director  
**DATE:** April 3, 2024

### J. A. MONTGOMERY CONSULTING SERVICE TEAM & LOSS CONTROL ACTIVITIES

Keith Hummel Associate Director Public Sector Risk Control <a href="mailto:khummel@jamontgomery.com">khummel@jamontgomery.com</a> Office: 856-552-6862	Mailing Address: TRIAD 1828 CENTRE Cooper Street, 18 <sup>th</sup> Floor Camden, NJ 08102  P.O. Box 99106 Camden, NJ 08101	Robert Garish Assistant Director Public Sector <a href="mailto:rgarish@jamontgomery.com">rgarish@jamontgomery.com</a> Office: 856-552-4650 Cell: 609-947-9719
Thomas Reilly Risk Control Consultant <a href="mailto:treilly@jamontgomery.com">treilly@jamontgomery.com</a> Office: 856-446-9205		Jacqueline Cardenosa Risk Control Consultant <a href="mailto:jcardenosa@jamontgomery.com">jcardenosa@jamontgomery.com</a> Office: 856-552-6888
Melissa Meccariello Administrative Assistant <a href="mailto:mmeccariello@jamontgomery.com">mmeccariello@jamontgomery.com</a> Office: 856-479-2070		

#### *LOSS CONTROL SURVEYS*

- Township of Waterford on March 1, 2024
- City of Margate on March 12, 2024
- City of Ventnor on March 13, 2024
- City of Estell Manor on March 14, 2024
- Borough of Folsom on March 14, 2024
- Township of Weymouth on March 14, 2024
- Borough of Woodbine on March 14, 2024

#### *LAW ENFORCEMENT LOSS CONTROL SURVEYS*

- City of Wildwood on March 13, 2024
- City of North Wildwood on March 28, 2024

### ***MEETINGS ATTENDED***

- Claims Committee Meeting on March 14, 2024
- Executive Fund Committee Meeting on March 20, 2024
- Annual Safety Breakfast on March 28, 2024

### ***MEL SAFETY INSTITUTE (MSI)***

All MSI communications will be distributed exclusively through the NJ MEL app, and an MSI Newsletter will be emailed to summarize the communications sent through the app.

If you would like to receive communications from MEL and MSI related to your position or operations, follow the directions to select from the list of available Push Notification “subscriptions.” Click here for [NJ MEL App Directions](#).

### ***MSI SAFETY DIRECTOR***

- MSI Leadership Academy
- March Is Ladder Safety Month
- Fall Protection: Understanding Warranty Requirements
- MSI Expo: Morris County Public Safety Training Academy, Wednesday, April 3, 2024, 8:30 am
- Hand Laceration Prevention Best Practices
- Respirators: Counterfeit P100 Filters
- New LMS
- MSI LIVE Schedule

### ***MSI LAW ENFORCEMENT***

- Juvenile’s Right to Attorney Representation – MSI LE Bulletin
- E-Bikes E-Scooters & Bicycle Considerations – MSI LE Bulletin
- Work Zone Training – MSI LE Training Announcement

### ***MSI NOW***

[MSI NOW](#) provides on-demand streaming videos and online classes that can be viewed 24/7 by our members. Topics pertain to many aspects of safety, risk control, employment practices, and supervision, and most can be viewed in under 20 minutes.

<b>MSI NOW</b>	
<b>Municipality</b>	<b>Number of Videos</b>
Absecon	1
Avalon	10
Cape May	1
Commercial	4
Dennis	1
Estell Manor	1
Galloway	3
Hamilton	2

MSI NOW	
Municipality	Number of Videos
Longport	1
Margate	7
Middle	6
Northfield	1
Pleasantville	5
Sea Isle City	1
Upper Deerfield	1
Waterford	1
West Wildwood	1
Weymouth	2
Wildwood	2
Wildwood Crest	1

### *MSI LIVE*

[MSI LIVE](#) features real-time, instructor-led in-person, and virtual classes. Experienced instructors provide an interactive experience for the attendee on a broad spectrum of safety and risk control topics. Most MSI LIVE offerings have been awarded continuing education credits for municipal designations and certifications. The MSI LIVE catalog provides a description of the course, the intended audience, and available credits.

The [MSI LIVE Schedule](#) is available for registration. Please register early, under-attended classes will be canceled.

To maintain the integrity of the MSI classes and our ability to offer CEUs, we must abide by the rules of the State agency that issued the designation. Chief among those rules is the attendee of the class must attend the whole session. **Attendees who enter the class more than 5 minutes late or leave early will not be awarded CEUs for the class or receive a certificate of completion.**

For virtual classes, the MSI utilizes the Zoom platform to track the time each attendee logs in and logs out. Also, we can track participation, to demonstrate to the State agency the student also participated in polls, quizzes, and question & answer activities during the class. The MSI maintains these records to document our compliance with the State agency.

If you need assistance using the MSI Learning Management System, please call the MSI Helpdesk at 866-661-5120.

**NOTE:** We need to keep our list of MSI Training Administrators up-to-date. If there are any changes or deletions, or you need to appoint a new Training Administrator, please advise Andrea Felip at [afelip@jamontgomery.com](mailto:afelip@jamontgomery.com).

# Technical Risks Services Director Monthly Executive Report



April 5, 2024

## Summary

This month I attended an intense boot camp provided by the Criminal Justice Institute and hosted by the Salem County OEM. This was a 32-hour course covering a wide range of pertinent topics concerning Cyber Defenses. I was encouraged to see many of our JIF members in attendance.

March was devoted to the continued push for Wizer Cyber Hygiene Training for 2024. We still have a small percentage of users who have not even logged in yet. Reminders have been sent. All members are encouraged to follow up with their users. The good news is almost 90 % of ACM has been trained! For the stragglers please advise your staff that Hygiene training is mandatory for deductible savings and BASIC Cyberframework compliance.

Vulnerability probing and penetration testing continues. There are a few towns with critical vulnerabilities. These towns have been notified. Please address these open items as soon as possible.

BASIC Cyberframework forms are rolling into our office, and we are clearing them with Underwriting. As of this writing Trico is about 69% compliant with BASIC. I have met with several members to clear up any confusion with the forms. Please get these into me as soon as possible to lock in the BASIC requirements. Currently these requirements are extremely easy to accomplish but they can change in a moment's notice without warning. Lock in your position today!

Page 4 of the CyberFramework document reads STOP GET A TECHNOLOGY EXPERT! This is becoming an increasingly difficult task for some towns. The local break/fix tech guy may have a friendly attitude but you need a real Managed Service Provider (MSP) capable of installing the products that you need to protect your environment AND provide the monitoring support needed make those products work for you. This adds cost to your IT budget so choosing wisely is very important.

This month's bulletin is on choosing an IT vendor for a municipality, especially when adhering to the New Jersey Cyber Risk Management Fund (Cyber JIF) Cybersecurity Framework which involves a meticulous process to ensure compliance with the advanced security measures outlined in the framework. This selection is paramount for maintaining robust cybersecurity defenses, managing risks effectively, and potentially reducing cyber insurance deductibles. Please use this as a template in your decision-making process.

Stay Cybersafe,

Jerry Caruso  
Technical Risks Services Director



# Choosing an IT vendor

## **Initial Screening:**

Ensure potential vendors are familiar with the NJ Cyber JIF Cybersecurity Framework and are capable of complying with its requirements. This includes basic, intermediate, and advanced security controls, such as data management, account management, vulnerability management, and more.

Detailed Evaluation:

## **Third-Party Risk Management**

**Vendor Assessment:** Utilize the 3rd Party Risk Assessment tool mentioned in the framework to evaluate potential IT vendors. This assessment should cover security requirements, indemnification, and proper insurance.

## **Defensive Tools and Strategies**

**Capability Review:** Check that the vendor can support defensive tools and strategies, including email and web browser protections (CIS 9), malware defenses (CIS 10), and network monitoring defense (CIS 13). Their solutions should enable the municipality to deploy protective DNS, use anti-exploitation tools, and ensure 24x7 support in case of an incident.

## **Support for Policy and Procedure Implementation**

Ensure the IT vendor can assist in implementing the necessary policies and procedures outlined in the advanced section of the framework. This includes developing a Business Continuity Plan that addresses technology assets and ensuring that the organization's technology practices policy is in compliance with the Cyber JIF's Cyber Risk Management Program.

## **Proven Experience and References**

**Past Performance:** Seek references from other municipalities or public sector entities that have utilized the vendor's services. This can provide insights into the vendor's ability to comply with the NJ Cyber JIF framework and their effectiveness in implementing the required security controls.

## **Contractual Agreements**

**Security Requirements:** Ensure that all contractual agreements with the chosen vendor include strict security requirements, indemnification clauses, and adequate insurance coverage. This protects the municipality in case of security breaches or failures in service delivery.

## **Conclusion**

Selecting an IT vendor based on the Cyber JIF Cybersecurity Framework involves a comprehensive evaluation of the vendor's ability to meet specific security controls, manage third-party risks, support defensive strategies, and adhere to stringent policies and procedures. By following this structured approach, a municipality can ensure that its IT vendor not only complies with the Cyber JIF framework but also strengthens its Cybersecurity posture against evolving threats.

April 8, 2024

To the Members of the  
Executive Board of the  
Atlantic County Municipal  
Joint Insurance Fund

I have enclosed for your review and, in some cases consideration, documents of presentation relating to claims, transfers, and the financial condition of the Fund. The statements included in this report are prepared on a “modified cash basis” and relate to financial activity through the month period ending **March 29, 2024**, for Closed Fund Years 1987 to 2019, and Fund Years 2020, 2021, 2022, 2023, and 2024. The reports, where required, are presented in a manner prescribed or permitted by the Department of Insurance and the Division of Local Government Services of the Department of Community Affairs.

All statements contained in this report are subject to adjustment by annual audit.

A summary of the contents of these statements is presented below.

**A.E.L.C.F. PARTICIPANT  
3/31/2024  
INCLUDES UNAUDITED INTEREST  
BALANCES**

Corbin City	\$ 828.00
Egg Harbor City	\$ 43,908.11
Egg Harbor Township	\$143,563.00
Hamilton Township	\$ 2,011.62
Hammonton Township	\$ 231,959.00
Middle Township	\$ 180,840.17
Mullica Township	\$ 28,953.08
Northfield	\$ 115,129.92
Pleasantville	\$ 12.21
Stone Harbor	\$ 9,824.62
Upper Deerfield Township	\$ 76,826.40
Upper Township	\$ 220,157.61
Waterford Township	\$ 35,660.80
	<u>\$1,089,724.54</u>
AELCF	\$ 941,069.75
UNAUDITED INTEREST	\$ 21,801.79
2023 DIVIDENDS TRANSFERRED	\$ 214,182.00
DIVIDENDS APPLIED TO ASSESSTMENT	<\$ 87,329.00>
AELCF 2/29/2024	\$1,089,724.54

**SUMMARY REPORT OF AELCF/DIVIDENDS/RETRO PROGRAM**

-attached

**RECEIPT ACTIVITY FOR THE PERIOD**

**Subrogation Receipts**

MAR: \$71,938.75 YTD: \$216,850.63

**Other:**

MAR: \$ -0- YTD: \$ -0-

**Adjustment:**

MAR: \$ 1,777.00 YTD: \$ 23,383.01

**CLAIM ACTIVITY FOR THE PERIOD:**

**ACTIVITY**

The enclosed report shows claim activity during the period:

**MAR:**

Checks Issued: 310 Claim Payments: 989 Total Issued: \$600,414.30

Effect on Cash Position: \$519,597.23

**CASH ACTIVITY FOR THE PERIOD:**

**ACTIVITY**

The enclosed reconciliation report details that during the reporting period the Fund's "Cash Position" changed as follows:

JAN:	Ending Balance	<u>\$47,321,868.53</u>
FEB:	Ending Balance	<u>\$49,540,465.85</u>
MAR:	Ending Balance	<u>\$48,853,734.46</u>



**INVESTMENT INTEREST & INVESTMENTS:**

Please refer to the schedule entitled: **ANALYSIS OF INVESTMENT ACTIVITY** which summarizes all the required adjustments to the investments of JCMI, Treasuries, and Investors:

**INTEREST EARNED:**

JCMI	MAR: \$ 39,974.09	YTD: \$112,509.90
Treasury	MAR: \$ -0-	YTD: \$517,747.69
Citizens	MAR: \$ 4,483.93	YTD: \$ 27,667.70
Citizens-sweep	MAR: \$ 18,813.89	YTD: \$ 34,946.42

Note: some off-set adjustments are required for administrative charges.

**RATE OF RETURN**-only interest as FROM ANALYSIS WORKSHEET.  
 MAR: 1.54%

**ALLOCATION OF FUNDS:**

	<b><u>JAN</u></b>	
Treasury-	\$22,022,399.00	49%
JCMI-	\$20,400,066.58	43%
Citizens-	\$ 3,899,402.95	8%
	<u>\$47,321,868.53</u>	

	<b><u>FEB</u></b>	
Treasury-	\$23,061,960.90	47%
JCMI-	\$20,318,090.99	41%
Citizens-	\$ 6,160,413.96	12%
	<u>\$49,540,465.85</u>	

	<b><u>MAR</u></b>	
Treasury-	\$23,067,694.88	47%
JCMI-	\$20,396,434.75	42%
Citizens-	\$ 5,389,604.83	11%
	<u>\$48,853,734.46</u>	

**Executive Committee**

**4/8/2024**

**Page 4**

**BILL LIST FOR THE PERIOD:**

Vouchers to be submitted for your consideration at the scheduled meeting show on the accompanying bill list at the end of my report.

The information contained in this cover report is a summary of key elements related to activity during the reporting period. Other detailed information is contained in the attached documents and, if desired, a more specific explanation on any question can be obtained by contacting me at 609-425-1136 or email [ocjjh4263@gmail.com](mailto:ocjjh4263@gmail.com).

Respectfully Submitted,

***John J. Hansen***

John J. Hansen  
Treasurer

**ACM JIF DEPOSITS**

33	MARCH	3/11/2024	STONE HARBOR		\$ 400.00
34	MARCH	3/11/2024	GALLOWAY		\$ 1,377.00
35	MARCH	3/11/2024	NORTH WILDWOOD		\$ 619.96
36	MARCH	3/11/2024	NORTH WILDWOOD		\$ 3,000.00
37	MARCH	3/11/2024	SEA ISLE CITY		\$ 208.33
38	MARCH	3/11/2024	GALLOWAY		\$ 392.03
39	MARCH	3/23/2024	EGG HARBOR		\$ 36,165.38
40	MARCH	3/28/2024	EGG HARBOR		\$ 31,312.31
41	MARCH	3/28/2024	FOLSOM		\$ 9.87
42	MARCH	3/28/2024	MILLVILLE		\$ 21.00
43	MARCH	3/28/2024	HAMILTON		\$ 200.00
44	MARCH	3/28/2024	FOLSOM		\$ 9.87
45	MARCH	3/31/2024	CITIZEN INTEREST		\$ 23,298.82
51					<b>\$ 97,014.57</b>
52					
53					<b>\$ 5,463,496.76</b>

***SECTION A***  
***INVESTMENT***  
***REPORT***

**SUMMARY OF CASH AND INVESTMENT INSTRUMENTS**  
**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**  
**ALL FUND YEARS COMBINED**  
**CURRENT MONTH**      **March**  
**CURRENT FUND YEAR**    **2024**

	Description:	INVESTORS LOSS	INVESTORS EXPENSE	INVESTORS:IMPRE SS	Wilmington Sweep	Wilmington Trust Asset Manager	JCMI
	ID Number:						
	Maturity (Yrs)						
	Purchase Yield:						
	<b>TOTAL for All Accts &amp; instruments</b>						
<b>Opening Cash &amp; Investment</b>	<b>\$49,540,465.75</b>	<b>5,588,454.80</b>	<b>750.00</b>	<b>571,209.06</b>	<b>86,896.83</b>	<b>22,975,064.07</b>	<b>20,318,090.99</b>
<b>Opening Interest Accrual Bal</b>	<b>\$152,782.41</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>152,782.41</b>	<b>-</b>
1 Interest Accrued and/or Int	\$81,922.94	\$0.00	\$0.00	\$0.00	\$0.00	\$81,922.94	\$0.00
2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 zation and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$967.93	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$967.93
5 Interest Paid - Cash Instr.s	\$61,063.07	\$23,298.92	\$0.00	\$0.00	\$0.00	\$0.00	\$37,764.15
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$45,345.66	\$0.00	\$0.00	\$0.00	\$0.00	\$5,733.98	\$39,611.68
8 Net Investment Income	\$189,299.60	\$23,298.92	\$0.00	\$0.00	\$0.00	\$87,656.92	\$78,343.76
9 Deposits - Purchases	\$1,129,478.39	\$73,715.75	\$274,510.72	\$700,000.00	\$0.00	\$81,251.92	\$0.00
10 (Withdrawals - Sales)	-\$1,923,586.34	-\$974,510.72	-\$274,510.72	-\$593,312.98	-\$81,251.92	\$0.00	\$0.00
Ending Cash & Investment Bal:	\$48,853,734.46	\$4,710,958.75	\$750.00	\$677,896.08	\$5,644.91	\$23,062,049.97	\$20,396,434.75
Ending Interest Accrual Balanc	\$234,705.35	\$0.00	\$0.00	\$0.00	\$0.00	\$234,705.35	\$0.00
Plus Outstanding Checks	\$220,446.65	\$0.00	\$17,888.23	\$202,558.42	\$0.00	\$0.00	\$0.00
(Less Deposits in Transit)	-\$4,484.93	-\$4,484.93	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Balance per Bank	\$49,069,696.18	\$4,706,473.82	\$18,638.23	\$880,454.50	\$5,644.91	\$23,062,049.97	\$20,396,434.75

Investment Income Allocation													
ETE Interest Allocation Flag 1=		1	1	1	1	0	1	0	0	0	1	1	
		Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	Total
2024	Opening Cash & Investment	208,414.84	439,461.87	77,943.38	1,672,091.25	83,819.85	440,797.75	203,872.07	(312,294.48)	(90,814.50)	562,938.82	0.00	\$3,286,230.86
	Opening Interest Accrual Bal	47.32	97.87	17.60	366.64	0.00	98.16	0.00	0.00	0.00	2,506.23	0.00	\$3,133.81
	1 Interest Accrued and/or Int	\$343.78	\$724.89	\$128.57	\$2,758.12	\$0.00	\$727.10	\$0.00	\$0.00	\$0.00	\$928.57	\$0.00	\$5,611.03
	2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	3 ization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	4 Accretion	\$4.06	\$8.56	\$1.52	\$32.59	\$0.00	\$8.59	\$0.00	\$0.00	\$0.00	\$10.97	\$0.00	\$66.30
	5 Interest Paid - Cash Instr.s	\$256.24	\$540.32	\$95.83	\$2,055.83	\$0.00	\$541.96	\$0.00	\$0.00	\$0.00	\$692.13	\$0.00	\$4,182.30
	6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	7 Realized Gain (Loss)	\$190.29	\$401.24	\$71.16	\$1,526.66	\$0.00	\$402.46	\$0.00	\$0.00	\$0.00	\$513.98	\$0.00	\$3,105.79
	8 Net Investment Income	\$794.38	\$1,675.01	\$297.08	\$6,373.20	\$0.00	\$1,680.11	\$0.00	\$0.00	\$0.00	\$2,145.65	\$0.00	\$12,965.42
	9 Interest Accrued - Net Char	\$343.78	\$724.89	\$128.57	\$2,758.12	\$0.00	\$727.10	\$0.00	\$0.00	\$0.00	\$928.57	\$0.00	\$5,611.03
	Ending Cash & Investment	\$176,986.89	\$440,398.24	\$78,111.90	\$1,580,423.42	\$83,819.85	\$441,750.76	\$203,872.07	-\$312,294.48	-\$90,814.50	\$290,555.18	\$0.00	\$2,892,809.34
	Ending Interest Accrual Bal	\$391.10	\$822.76	\$146.16	\$3,124.75	\$0.00	\$825.26	\$0.00	\$0.00	\$0.00	\$3,434.80	\$0.00	\$8,744.84

Investment Income Allocation													
ETE Interest Allocation Flag 1=		1	1	1	1	0	1	0	0	0	1	1	
		Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	Total
2023	Opening Cash & Investment	116,695.05	2,172,263.88	439,953.26	7,457,376.26	(2,777.00)	2,408,920.04	311.00	0.10	0.00	416,499.32	0.00	\$13,009,241.91
	Opening Interest Accrual Bal	342.17	5,953.63	1,225.16	21,148.14	0.00	6,543.13	0.00	0.00	0.00	3,222.95	0.00	\$38,435.17
	1 Interest Accrued and/or Int	\$192.49	\$3,583.16	\$725.70	\$12,300.96	\$0.00	\$3,973.52	\$0.00	\$0.00	\$0.00	\$687.02	\$0.00	\$21,462.85
	2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	3 ization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	4 Accretion	\$2.27	\$42.34	\$8.57	\$145.34	\$0.00	\$46.95	\$0.00	\$0.00	\$0.00	\$8.12	\$0.00	\$253.59
	5 Interest Paid - Cash Instr.s	\$143.48	\$2,670.78	\$540.92	\$9,168.80	\$0.00	\$2,961.75	\$0.00	\$0.00	\$0.00	\$512.08	\$0.00	\$15,997.81
	6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	7 Realized Gain (Loss)	\$106.55	\$1,983.33	\$401.69	\$6,808.78	\$0.00	\$2,199.41	\$0.00	\$0.00	\$0.00	\$380.27	\$0.00	\$11,880.03
	8 Net Investment Income	\$444.78	\$8,279.61	\$1,676.89	\$28,423.88	\$0.00	\$9,181.63	\$0.00	\$0.00	\$0.00	\$1,587.49	\$0.00	\$49,594.28
	9 Interest Accrued - Net Char	\$192.49	\$3,583.16	\$725.70	\$12,300.96	\$0.00	\$3,973.52	\$0.00	\$0.00	\$0.00	\$687.02	\$0.00	\$21,462.85
	Ending Cash & Investment	\$112,333.44	\$2,173,891.59	\$439,886.42	\$7,305,669.05	-\$2,777.00	\$2,414,128.15	\$311.00	\$0.10	\$0.00	\$416,489.80	\$0.00	\$12,859,932.55
	Ending Interest Accrual Bal	\$534.66	\$9,536.78	\$1,950.86	\$33,449.10	\$0.00	\$10,516.65	\$0.00	\$0.00	\$0.00	\$3,909.96	\$0.00	\$59,898.03

	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	Total
<b>2022</b>												
Opening Cash & Investment	109,516.59	2,040,018.81	398,454.02	3,470,801.96	(6,106.60)	2,046,203.48	0.00	(0.50)	0.00	358,438.78	436,546.84	\$8,853,873.38
Opening Interest Accrual Bal	252.66	6,167.61	1,195.73	10,725.61	0.00	6,103.20	0.00	0.00	0.00	3,706.77	1,300.58	\$29,452.17
1 Interest Accrued and/or Inte	\$180.65	\$3,365.02	\$657.25	\$5,725.10	\$0.00	\$3,375.22	\$0.00	\$0.00	\$0.00	\$591.25	\$720.09	\$14,614.56
2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 ization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$2.13	\$39.76	\$7.77	\$67.64	\$0.00	\$39.88	\$0.00	\$0.00	\$0.00	\$6.99	\$8.51	\$172.67
5 Interest Paid - Cash Instr.s	\$134.65	\$2,508.19	\$489.90	\$4,267.33	\$0.00	\$2,515.79	\$0.00	\$0.00	\$0.00	\$440.70	\$536.73	\$10,893.29
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$99.99	\$1,862.59	\$363.80	\$3,168.93	\$0.00	\$1,868.24	\$0.00	\$0.00	\$0.00	\$327.26	\$398.58	\$8,089.40
8 Net Investment Income	\$417.42	\$7,775.56	\$1,518.71	\$13,229.00	\$0.00	\$7,799.13	\$0.00	\$0.00	\$0.00	\$1,366.19	\$1,663.90	\$33,769.91
9 Interest Accrued - Net Char	\$180.65	\$3,365.02	\$657.25	\$5,725.10	\$0.00	\$3,375.22	\$0.00	\$0.00	\$0.00	\$591.25	\$720.09	\$14,614.56
Ending Cash & Investment	\$174,572.50	\$2,039,750.35	\$399,315.49	\$3,352,562.97	-\$6,106.60	\$2,050,627.39	\$0.00	-\$0.50	\$0.00	\$359,213.73	\$437,490.66	\$8,807,425.99
Ending Interest Accrual Bal	\$433.31	\$9,532.63	\$1,852.98	\$16,450.71	\$0.00	\$9,478.42	\$0.00	\$0.00	\$0.00	\$4,298.02	\$2,020.67	\$44,066.73

	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	Total
<b>2021</b>												
Opening Cash & Investment	228,763.14	1,585,274.85	279,500.48	288,699.64	(45,632.79)	1,856,159.71	0.00	45,631.00	0.00	207,705.50	0.00	\$4,446,101.53
Opening Interest Accrual Bal	609.26	5,019.90	921.71	2,054.38	0.00	5,751.32	0.00	0.00	0.00	655.71	0.00	\$15,012.28
1 Interest Accrued and/or Inte	\$377.35	\$2,614.92	\$461.04	\$476.21	\$0.00	\$3,061.74	\$0.00	\$0.00	\$0.00	\$342.61	\$0.00	\$7,333.86
2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 ization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$4.46	\$30.90	\$5.45	\$5.63	\$0.00	\$36.17	\$0.00	\$0.00	\$0.00	\$4.05	\$0.00	\$86.65
5 Interest Paid - Cash Instr.s	\$281.26	\$1,949.09	\$343.64	\$354.95	\$0.00	\$2,282.14	\$0.00	\$0.00	\$0.00	\$255.37	\$0.00	\$5,466.45
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$208.87	\$1,447.40	\$255.19	\$263.59	\$0.00	\$1,694.72	\$0.00	\$0.00	\$0.00	\$189.64	\$0.00	\$4,059.41
8 Net Investment Income	\$871.93	\$6,042.29	\$1,065.32	\$1,100.38	\$0.00	\$7,074.77	\$0.00	\$0.00	\$0.00	\$791.67	\$0.00	\$16,946.36
9 Interest Accrued - Net Char	\$377.35	\$2,614.92	\$461.04	\$476.21	\$0.00	\$3,061.74	\$0.00	\$0.00	\$0.00	\$342.61	\$0.00	\$7,333.86
Ending Cash & Investment	\$229,257.73	\$1,560,823.48	\$268,896.52	\$235,331.14	-\$45,632.79	\$1,860,172.74	\$0.00	\$45,631.00	\$0.00	\$208,154.56	\$0.00	\$4,362,634.38
Ending Interest Accrual Bal	\$986.60	\$7,634.82	\$1,382.75	\$2,530.59	\$0.00	\$8,813.06	\$0.00	\$0.00	\$0.00	\$998.32	\$0.00	\$22,346.14

	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	Total
<b>2020</b>												
Opening Cash & Investment	142,987.54	\$26,641.98	203,177.79	445,658.71	(35,019.56)	1,946,882.90	0.00	34,245.80	0.00	142,062.23	38,505.73	\$3,445,143.12
Opening Interest Accrual Bal	540.13	2,507.32	662.13	1,988.17	0.00	6,032.43	0.00	0.00	0.00	448.96	119.31	\$12,298.45
1 Interest Accrued and/or Int	\$235.86	\$868.70	\$335.14	\$735.12	\$0.00	\$3,211.39	\$0.00	\$0.00	\$0.00	\$234.33	\$63.52	\$5,684.05
2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 ization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$2.79	\$10.26	\$3.96	\$8.69	\$0.00	\$37.94	\$0.00	\$0.00	\$0.00	\$2.77	\$0.75	\$67.16
5 Interest Paid - Cash Instr.s	\$175.80	\$647.50	\$249.81	\$547.93	\$0.00	\$2,393.68	\$0.00	\$0.00	\$0.00	\$174.66	\$47.34	\$4,236.73
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$130.55	\$480.84	\$185.51	\$406.90	\$0.00	\$1,777.56	\$0.00	\$0.00	\$0.00	\$129.71	\$35.16	\$3,146.21
8 Net Investment Income	\$545.00	\$2,007.30	\$774.41	\$1,698.63	\$0.00	\$7,420.57	\$0.00	\$0.00	\$0.00	\$541.47	\$146.77	\$13,134.15
9 Interest Accrued - Net Char	\$235.86	\$868.70	\$335.14	\$735.12	\$0.00	\$3,211.39	\$0.00	\$0.00	\$0.00	\$234.33	\$63.52	\$5,684.05
Ending Cash & Investment	\$142,030.09	\$497,648.60	\$200,717.06	\$426,402.29	-\$35,019.56	\$1,951,092.08	\$0.00	\$34,245.80	\$0.00	\$142,369.37	\$38,588.98	\$3,398,074.71
Ending Interest Accrual Bal	\$775.99	\$3,376.01	\$997.28	\$2,723.29	\$0.00	\$9,243.81	\$0.00	\$0.00	\$0.00	\$683.29	\$182.83	\$17,982.50

	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	Total
<b>Closed FY</b>												
Opening Cash & Investment	1,987.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,052,272.79	0.00	\$14,054,260.39
Opening Interest Accrual Bal	0.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,041.32	0.00	\$47,041.99
1 Interest Accrued and/or Int	\$3.28	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$23,179.27	\$0.00	\$23,182.54
2 Interest Accrued - discount	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3 ization and/or Interest Cost)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Accretion	\$0.04	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$273.87	\$0.00	\$273.90
5 Interest Paid - Cash Instr.s	\$2.44	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$17,277.18	\$0.00	\$17,279.62
6 Interest Paid - Term Instr.s	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7 Realized Gain (Loss)	\$1.81	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12,830.10	\$0.00	\$12,831.91
8 Net Investment Income	\$7.58	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$53,560.40	\$0.00	\$53,567.98
9 Interest Accrued - Net Char	\$3.28	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$23,179.27	\$0.00	\$23,182.54
Ending Cash & Investment	-\$698.40	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$14,082,653.93	\$0.00	\$14,081,955.53
Ending Interest Accrual Bal	\$3.94	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$70,220.59	\$0.00	\$70,224.53



ANALYSIS OF INVESTMENT ACTIVITY

FISCAL YEAR 2022

**ALL INVESTMENTS**  
**JCMI-from statement**

	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	MARCH, 2021	
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL	FROM INCEPTION		
OPENING INVESTMENT INTEREST	\$ 20,334,047.19	\$ 20,400,066.58	\$ 20,318,090.99	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 21,000,000.00	INTEREST	2024 INTEREST
														\$ 527,221.13		\$ 112,509.90
ACTIVITY:																
REALIZED GAIN/LOSS																
UNREALIZED GAIN/LOSS	\$ 27,597.92	\$ (113,585.49)	\$ 39,611.68													
ACCRETION/AMORTIZATION	\$ 4,250.39	\$ 4,617.55	\$ 967.93													
<b>TOTAL ACTIVITY</b>	<b>\$ 31,848.31</b>	<b>\$ (108,967.94)</b>	<b>\$ 40,579.61</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (36,540.02)</b>	<b>\$ (2,010,956.67)</b>	
ADMINISTRATIVE EXPENSES:																
TRUSTEE	\$ 510.07	\$ 508.03	\$ 509.99													
INVESTMENT ADVISORY	\$ 1,190.17	\$ 8,146.01	\$ 1,189.96													
CONSULTING	\$ 510.07	\$ 508.03	\$ 509.99													
MISC.																
<b>TOTAL ADMINISTRATIVE EXPENSES</b>	<b>\$ 2,210.31</b>	<b>\$ 9,162.07</b>	<b>\$ 2,209.94</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 13,582.32</b>	<b>\$ 57,645.11</b>	
REDEEMED BALANCE	\$ 20,400,066.58	\$ 20,318,090.99	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ 20,396,434.75	\$ -		
														\$ 19,458,619.35		
<b>CITIZENS</b>	<b>\$ 18,226.52</b>	<b>\$ 4,956.25</b>	<b>\$ 4,484.93</b>													
														\$ 27,667.70		\$ 27,667.70
<b>CITIZENS SWEEP ACCOUNT</b>	<b>\$ 2,761.42</b>	<b>\$ 13,371.11</b>	<b>\$ 18,813.89</b>													
														\$ 34,946.42		\$ 34,946.42
<b>TREASURY-from analysis provided by M&amp;T</b>																
OPENING BALANCE	\$ 22,617,786.58	\$ 22,954,286.16	\$ 22,975,064.07	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97		
OPENING BALANCE-INTEREST ACCRUAL	\$ 510,064.58	\$ 207,650.95	\$ 152,782.41	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35		
INTEREST ACCRUED	\$ 84,165.58	\$ 76,299.94	\$ 81,922.94													
ACCRETION/AMORTIZATION REALIZED																
DIVIDEND RECEIVED																
INTEREST RECEIVED	\$ 386,579.21	\$ 131,168.48	\$ -											\$ 517,747.69		\$ 517,747.69
REALIZED/UNREALIZED GAIN (LOSS)	\$ 14,686.01	\$ (91,606.65)	\$ 5,733.98													\$ 692,871.71
TRANSFER IN:	\$ 7,114,677.49	\$ 113,673.58	\$ 81,251.92													
TRANSFER OUT:	\$ (7,179,443.13)	\$ (132,457.50)														
ENDING CASH & INVESTMENT	\$ 22,954,286.16	\$ 22,975,064.07	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97	\$ 23,062,049.97			
ENDING INTEREST ACCRUAL	\$ 207,650.95	\$ 152,782.41	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35	\$ 234,705.35			
INTEREST EFFECT ON CASH POSITION	\$ 386,579.21	\$ 131,168.48	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			
	\$ 14,686.01	\$ (91,606.65)	\$ 5,733.98	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			
MANAGEMENT FEE	\$ 2,835.60	\$ -												\$ 2,835.60		
FROM ACMCIR FILE																
NET INVESTMENT INCOME	\$ 183,023.42	\$ (78,954.94)	\$ 189,299.60											\$ 293,368.08		



Corporate Headquarters  
1100 North Market Street  
Wilmington, DE 19890-0001

# Accounting Statement

20772-000 - ATLANTIC COUNTY MUNICIPAL JIF

March 01, 2024 - March 31, 2024

## Accounts Included

WILMINGTON TRUST, NA AS INVESTMENT AGENT UNDER AGREEMENT  
DATED 2/23/2017 WITH ATLANTIC COUNTY MUNICIPAL MANAGEMENT JOINT  
INSURANCE FUND

20772-000

## Your Portfolio at a Glance

Opening Market Value w/Accrued Income	\$23,127,846.48
Net of Contributions & Withdrawals	\$81,251.92
Net Investment Change	\$87,656.92
<b>Closing Market Value w/Accrued Income</b>	<b>\$23,296,755.32</b>

## Your Relationship Team

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Senior Portfolio Manager  
zqasim@wilmingtontrust.com

**SUSAN T O'NEAL** (302) 636-6448  
ICS Relationship Manager  
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JOHN HANSEN  
ATLANTIC COUNTY MUNICIPAL JIF  
PO BOX 97  
OCEAN CITY, NJ 08226

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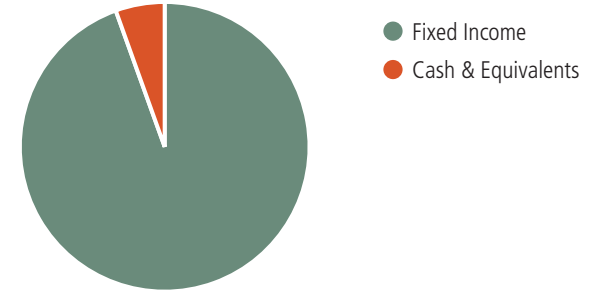
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Please see Glossary for descriptions of key fields depicted in this statement.

## Asset Allocation

Asset Class	Total Market Value	Allocation (%)
Fixed Income	\$21,796,050.62	94.51%
Cash & Equivalents	1,265,999.35	5.49
<b>TOTAL</b>	<b>\$23,062,049.97</b>	<b>100%</b>



## Accrued Income by Asset Class Summary

Asset Class	Market Value	Accrued Income	Market Value + Accrued Income	Estimated Annual Income	Estimated Yield (%)
Fixed Income	\$21,796,050.62	\$194,771.35	\$21,990,821.97	\$897,626.25	4.12%
Cash & Equivalents	1,265,999.35	39,934.00	1,305,933.35	67,162.34	5.31
<b>TOTAL</b>	<b>\$23,062,049.97</b>	<b>\$234,705.35</b>	<b>\$23,296,755.32</b>	<b>\$964,788.59</b>	<b>4.18%</b>

Market Values may be generated using market quotations, closing price, mean bid or ask, or estimated market value obtained from quotation services. Mutual fund balances are incorporated into appropriate asset classifications. Derivative instruments are classified based upon the corresponding underlying security and does not represent a comprehensive risk assessment of your account.

Asset values will fluctuate. **Estimated Annual Income** is provided for comparison purposes only. Estimated Annual Income is based on historical data or other assumptions and is not a guarantee of future results. This report should not be used to prepare tax documents.

Yield for Cash & Equivalents is calculated based on Market Value of investments and does not include Uninvested Cash (Cash Balance) or Cash Payables and Receivables for pending trades.

## Portfolio Valuations & Activity Summary

Category	Current Period	Year-to-Date
<b>Opening Market Value</b>	<b>\$22,975,064.07</b>	<b>\$22,617,786.58</b>
Accrued Income	152,782.41	510,064.58
<b>Opening Market Value w/Accrued Income</b>	<b>\$23,127,846.48</b>	<b>\$23,127,851.16</b>
<b>Contributions</b>		
Cash Receipts	81,251.92	7,309,602.99
Intra-Account Transfers	-	-
Other Receipts	-	-
Securities Transferred In	-	-
Tax Refunds	-	-
<b>Total Contributions</b>	<b>\$81,251.92</b>	<b>\$7,309,602.99</b>
<b>Withdrawals</b>		
Cash Disbursements	-	-
Intra-Account Transfers	-	-
Other Disbursements	-	-7,311,900.63
Other Fees	-	-
Securities Transferred Out	-	-
Tax Payments	-	-
Taxes Withheld	-	-
Wilmington Trust Fees	-	-
<b>Total Withdrawals</b>	<b>-</b>	<b>-\$7,311,900.63</b>
<b>Net Contributions &amp; Withdrawals</b>	<b>\$81,251.92</b>	<b>-\$2,297.64</b>
Closing Market Value	23,062,049.97	23,062,049.97
Accrued Income	234,705.35	234,705.35
<b>Closing Market Value w/Accrued Income</b>	<b>\$23,296,755.32</b>	<b>\$23,296,755.32</b>
<b>Net Investment Change</b>	<b>\$87,656.92</b>	<b>\$171,201.80</b>
<b>Net Investment Change Detail</b>		
	Current Period	Year-to-Date
<b>Net Investment Change</b>	<b>\$87,656.92</b>	<b>\$171,201.80</b>
<b>Income Earned</b>		
Dividends	-	-
Net Interest	-	517,747.69
Other Income	-	-
Change in Accrual	81,922.94	-275,359.23
<b>Total Income Earned</b>	<b>\$81,922.94</b>	<b>\$242,388.46</b>
<b>Market Appreciation</b>	<b>\$5,733.98</b>	<b>-\$71,186.66</b>

## Relationship Summary *(continued)*

120772-000 - ATLANTIC COUNTY MUNICIPAL JIF

March 01, 2024 - March 31, 2024

## Income Received Summary

Category	Current Period	Year-to-Date
<b>Taxable</b>		
Dividends	-	-
Interest	-	561,178.65
Other Income	-	-
<b>Total Taxable</b>	<b>-</b>	<b>\$561,178.65</b>
<b>Tax-Exempt</b>		
Dividends	-	-
Interest	-	-
Other Income	-	-
<b>Total Tax-Exempt</b>	<b>-</b>	<b>-</b>
<b>TOTAL RECEIVED</b>	<b>-</b>	<b>\$561,178.65</b>

**Actual income received** may differ from that presented on this schedule due to restatements related to corporate actions. Purchase of Accrued Interest on securities is not included in the Summary. Taxable and Tax-exempt status is determined by security, rather than account type, so tax-exempt accounts may have holdings included in the Taxable category. This is not a tax document and should not be used for tax preparation.

## Realized Gain/Loss Summary

Category	Current Period	Year-to-Date
<b>Short Term</b>		
Gain	-	-
Loss	-	-
<b>Total Short Term</b>	<b>-</b>	<b>-</b>
<b>Long Term</b>		
Gain	-	-
Loss	-	-
<b>Total Long Term</b>	<b>-</b>	<b>-</b>
<b>TOTAL GAIN/LOSS</b>	<b>-</b>	<b>-</b>

**Realized Gain/Loss estimates** are preliminary, are reliant upon accurate cost basis information, and may not reflect all cost basis adjustments. Corporate actions and income reclassifications will alter a holding's basis and subsequent gain/loss values. Gain/Loss estimates include results for both Taxable and Tax-exempt accounts. This is not a tax document and should not be used for tax preparation.

Management and advisory fees charged through accounts not listed under the Market Value Summary will not be shown in this schedule. Transactions classified in Other (Receipts, Fees, and Disbursements) categories are identified in the Transaction Activity Detail.

Market Appreciation reflects your Closing Market Value w/Accrued Income, less the net of contributions, withdrawals, and income earned, less your Opening Market Value w/Accrued Income.

**Cash Activity Summary**

Category	Current Period Cash	Year-to-Date Cash
<b>Opening Balance</b>	-	-
<b>Receipts</b>		
Cash Receipts	81,251.92	7,309,602.99
Dividends	-	-
Intra-Account Transfers	-	-
Maturities	-	6,750,721.98
Net Interest	-	517,747.69
Other Income	-	-
Other Receipts	-	-
Sales	-	-
Tax Refunds	-	-
<b>Total Receipts</b>	<b>\$81,251.92</b>	<b>\$14,578,072.66</b>
<b>Disbursements</b>		
Cash Disbursements	-	-
Intra-Account Transfers	-	-
Other Disbursements	-	-7,311,900.63
Other Fees	-	-
Purchases	-81,251.92	-7,266,172.03
Tax Payments	-	-
Taxes Withheld	-	-
Wilmington Trust Fees	-	-
<b>Total Disbursements</b>	<b>-\$81,251.92</b>	<b>-\$14,578,072.66</b>
<b>TOTAL CLOSING BALANCE</b>	-	-
Net Total Payables and Receivables	-	-
<b>NET OF CASH BALANCE</b>	-	-

Opening and Total Closing Balances include holdings of cash and money market funds in USD currency.  
Pending purchases, pending sales and foreign currency holdings are not included.

## Asset & Sub Asset Allocation

Asset Class	Total Market Value (%)	Closing Market Value	Cost	Unrealized Gain/Loss	Accrued Income	Market Value w/ Accrued Income
<b>■ Fixed Income</b>						
U.S. Taxable Fixed Income	94.51%	\$21,796,050.62	\$21,797,438.05	-\$1,387.43	\$194,771.35	\$21,990,821.97
<b>Total Fixed Income</b>	<b>94.51%</b>	<b>\$21,796,050.62</b>	<b>\$21,797,438.05</b>	<b>-\$1,387.43</b>	<b>\$194,771.35</b>	<b>\$21,990,821.97</b>
<b>■ Cash &amp; Equivalents</b>						
Taxable	5.49	1,265,999.35	1,265,999.35	-	39,934.00	1,305,933.35
<b>Total Cash &amp; Equivalents</b>	<b>5.49%</b>	<b>\$1,265,999.35</b>	<b>\$1,265,999.35</b>	<b>-</b>	<b>\$39,934.00</b>	<b>\$1,305,933.35</b>
<b>TOTAL ASSETS</b>	<b>100%</b>	<b>\$23,062,049.97</b>	<b>\$23,063,437.40</b>	<b>-\$1,387.43</b>	<b>\$234,705.35</b>	<b>\$23,296,755.32</b>

## Fixed Income

Security Name	Quantity	Market Price	Market Value	Cost	Unrealized Gain/Loss	Accrued Income	Estimated Annual Income	Effective Duration	Yield to Worst (%)	Market Value (%)
<b>U.S. Taxable Fixed Income</b>										
<b>U.S. Treasury Bonds</b>										
UNITED STATES TREASURY NOTES DTD 06/30/2022 3.000% 06/30/2024 CUSIP: 91282CEX5 Moody's: AAA	3,041,000	\$99.415	\$3,023,210.15	\$2,993,935.00	\$29,275.15	\$23,058.13	\$91,230.00	0.25	5.35%	13.11%
UNITED STATES TREASURY NOTES DTD 01/31/2023 4.125% 01/31/2025 CUSIP: 91282CGG0 Moody's: AAA	3,000,000	99.186	2,975,580.00	2,981,367.19	-5,787.19	20,738.32	123,750.00	0.82	5.08	12.90
UNITED STATES TREASURY NOTES DTD 02/28/2023 4.625% 02/28/2025 CUSIP: 91282CGN5 Moody's: AAA	3,724,000	99.594	3,708,880.56	3,700,725.00	8,155.56	14,976.96	172,235.00	0.89	5.06	16.08
UNITED STATES TREASURY NOTES DTD 03/31/2023 3.875% 03/31/2025 CUSIP: 91282CGU9 Moody's: AAA	2,380,000	98.871	2,353,129.80	2,350,900.78	2,229.02	46,613.72	92,225.00	0.96	5.01	10.20
UNITED STATES TREASURY NOTES DTD 06/30/2023 4.625% 06/30/2025 CUSIP: 91282CHL8 Moody's: AAA	4,625,000	99.637	4,608,211.25	4,613,076.17	-4,864.92	54,064.22	213,906.25	1.20	4.86	19.98
UNITED STATES TREASURY NOTES DTD 01/15/2023 3.875% 01/15/2026 CUSIP: 91282CGE5 Moody's: AAA	2,880,000	98.570	2,838,816.00	2,855,475.00	-16,659.00	23,607.69	111,600.00	1.71	4.66	12.31



## Fixed Income *(continued)*

Security Name	Quantity	Market Price	Market Value	Cost	Unrealized Gain/Loss	Accrued Income	Estimated Annual Income	Effective Duration	Yield to Worst (%)	Market Value (%)
UNITED STATES TREASURY NOTES DTD 02/15/2023 4.000% 02/15/2026 CUSIP: 91282CGL9 Moody's: AAA	2,317,000	\$98.758	\$2,288,222.86	\$2,301,958.91	-\$13,736.05	\$11,712.31	\$92,680.00	1.79	4.64%	9.92%
<b>Total U.S. Treasury Bonds</b>			<b>\$21,796,050.62</b>	<b>\$21,797,438.05</b>	<b>-\$1,387.43</b>	<b>\$194,771.35</b>	<b>\$897,626.25</b>	<b>1.06</b>	<b>4.96%</b>	<b>94.51%</b>
<b>Total U.S. Taxable Fixed Income</b>			<b>\$21,796,050.62</b>	<b>\$21,797,438.05</b>	<b>-\$1,387.43</b>	<b>\$194,771.35</b>	<b>\$897,626.25</b>	<b>1.06</b>	<b>4.96%</b>	<b>94.51%</b>
<b>TOTAL FIXED INCOME</b>			<b>\$21,796,050.62</b>	<b>\$21,797,438.05</b>	<b>-\$1,387.43</b>	<b>\$194,771.35</b>	<b>\$897,626.25</b>	<b>1.06</b>	<b>4.96%</b>	<b>94.51%</b>

## Cash & Equivalents

Security Name	Quantity	Market Price	Market Value	Cost	Unrealized Gain/Loss	Accrued Income	Estimated Annual Income	Effective Duration	Yield to Worst (%)	Market Value (%)
<b>Taxable</b>										
<b>U.S. Treasury Bills</b>										
UNITED STATES TREASURY BILLS DTD 08/10/2023 DUE 08/08/2024 CUSIP: 912797GK7	1,330,000	\$95.19	\$1,265,999.35	\$1,265,999.35	-	\$39,934.00	\$67,162.34	0.36	5.05%	5.49%
<b>Total U.S. Treasury Bills</b>			<b>\$1,265,999.35</b>	<b>\$1,265,999.35</b>	<b>-</b>	<b>\$39,934.00</b>	<b>\$67,162.34</b>	<b>0.36</b>	<b>5.05%</b>	<b>5.49%</b>
<b>Total Taxable</b>			<b>\$1,265,999.35</b>	<b>\$1,265,999.35</b>	<b>-</b>	<b>\$39,934.00</b>	<b>\$67,162.34</b>	<b>0.36</b>	<b>5.05%</b>	<b>5.49%</b>
<b>TOTAL CASH &amp; EQUIVALENTS</b>			<b>\$1,265,999.35</b>	<b>\$1,265,999.35</b>	<b>-</b>	<b>\$39,934.00</b>	<b>\$67,162.34</b>	<b>0.36</b>	<b>5.05%</b>	<b>5.49%</b>

<b>Grand Total</b>			<b>\$23,062,049.97</b>	<b>\$23,063,437.40</b>	<b>-\$1,387.43</b>	<b>\$234,705.35</b>	<b>\$964,788.59</b>			<b>100%</b>
Accrued Income			\$234,705.35							

**Grand Total Market Value w/ Accrued Income** **\$23,296,755.32**

## Transaction Activity Detail

Trade Date Settlement Date	Transaction Type	Transaction Description	Quantity	Cash Value	Cash Management
<b>OPENING BALANCE</b>				-	-
03/13/2024	Cash Receipts	CASH RECEIPT ACH TRANSFER FROM CHECKING 9871761889	-	\$81,251.92	-
03/13/2024	Purchases	PURCHASED 83000 PAR VALUE OF U.S. TREASURY BILLS 8/08/24 AT 97.8939 TRADE DATE 2024-03-13 SETTLEMENT DATE 2024-03-13	83,000	-81,251.92	-
<b>CLOSING BALANCE</b>				-	-

## Realized Gain / Loss Detail

Transaction Description	Disposition Date	Quantity	Cost	Proceeds	Short Term Gain/Loss	Long Term Gain/Loss	Realized Gain/Loss
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There are no realized gain/loss transactions to report for this statement period.

**Realized Gain/Loss estimates** are preliminary, are reliant upon accurate cost basis information, and may not reflect all cost basis adjustments. Corporate actions and income reclassifications will alter a holding's basis and subsequent gain/loss values. Gain/Loss estimates include results for both Taxable and Tax-exempt accounts. This is not a tax document and should not be used for tax preparation.

## Statement Disclosures

### Statement Review; Limitations on Actions

Please carefully review your statements and retain them for your records as they may contain notices, disclosures and other important information in addition to the summary of the transactions in your account for the reporting period, including contributions, distributions, transfers, and purchases and sales of securities. Summary data is also provided for off-setting investment option transfers or other transfers made between accounts.

Please report promptly any material inaccuracy or discrepancy in this information to your Relationship Manager. If revised data becomes available to Wilmington Trust after these reports are generated, we may update our records accordingly; however, revised data typically will not result in the generation of a new report.

### Fee Arrangements

Wilmington Trust and its affiliates may earn additional compensation from uninvested cash in the form of earnings, which Wilmington Trust expects will be generated at the prevailing federal funds rate. Such earnings may be generated between the time the moneys are received by Wilmington Trust and actually forwarded to implement investment instructions, or between the time a distribution is issued and presented.

### Affiliated Advisers

"Wilmington Trust" is a service mark encompassing the trust and investment business of Manufacturer's & Trader's Trust Company ("M&T Bank") in providing services to this account, and of some of M&T Bank's subsidiaries and affiliates, serving individual and institutional clients. Subsidiaries and affiliates include, but are not limited to, Wilmington Trust Company (operating in Delaware only); Wilmington Trust, N.A., a national association; and Wilmington Funds Management Corp., Wilmington Trust Investment Advisors, Inc., and other registered investment adviser affiliates. For additional information regarding the Wilmington Trust brand, underlying entities, and products and services offered, please visit our web site at [www.wilmingtontrust.com](http://www.wilmingtontrust.com).

In performing discretionary investment services for an account, M&T Bank or an affiliate may invest account assets in one or more mutual funds, including mutual funds ("Affiliated Funds") advised by investment management affiliates of M&T Bank, including Wilmington Funds Management Corporation ("WFMC") and Wilmington Trust Investment Advisors, Inc. ("WTIA") ("Affiliated Advisers").

The Affiliated Advisers, M&T Bank, and M&T Securities, Inc., another affiliate of M&T Bank (collectively "M&T") may also provide administrative and shareholder services, and services under Rule 12b-1 plans to the Affiliated Funds, and may receive compensation for those services. If M&T provides additional services to the Affiliated Funds, it would be entitled to receive additional

compensation from those funds. The compensation for services provided to the Affiliated Funds is determined by the Board of Trustees that governs each Affiliated Fund, and is subject to change from time to time in the discretion of such Board of Trustees.

Currently, WFMC, in its capacity as investment adviser to the Affiliated Funds, is entitled to receive annual advisory fees between 0.45% and 0.95%. WFMC compensates WTIA directly for sub-advisory services provided to the Affiliated Funds. In its capacity as co-administrator of the Wilmington Funds, WFMC is currently entitled to receive annual co-administration fees from the Wilmington Funds as follows: 0.04% on the first \$5 billion; 0.03% on the next \$2 billion; 0.025% on the next \$3 billion; and 0.018% on assets in excess of \$10 billion. All fees are calculated based on average daily assets.

M&T Bank may be entitled to receive an annual shareholder services fee of up to 0.25% with respect to the assets of certain accounts invested in the Wilmington Funds. If M&T Bank or an affiliate has investment discretion over an account, then an account may receive a credit against the account-level fiduciary (or investment management) fee for all or some portion of the foregoing fees when account assets are invested in an Affiliated Fund. Alternatively, the value of account assets invested in an Affiliated Fund may be excluded from calculation of the account-level fiduciary (or investment management) fee.

Please consult a current prospectus, available at [www.wilmingtonfunds.com](http://www.wilmingtonfunds.com), for the relevant Affiliated Fund or contact your Relationship Manager for additional information.

WTIA maintains updated disclosure information on Form ADV Part 2, the Disclosure Brochure. The Disclosure Brochure contains information about WTIA, including a description of WTIA's programs, fees, trading practices, conflicts of interest, key personnel, and other business activities. The Disclosure Brochure is available to all clients of WTIA upon request by contacting WTIA at (410

**Investment products, included affiliated offerings, are not insured by the Federal Deposit Insurance Corporation or any other governmental agency, are not deposits of or other obligations of or guaranteed by Wilmington Trust, M&T, or any other bank or entity, and are subject to risks, including a possible loss of the principal amount invested.**

**Statement Disclosures** *(continued)*

Where permitted, Wilmington Trust, its affiliates and its sub-advisors may execute portfolio transactions with brokerage firms that provide proprietary and/or third-party research products and services, as well as trade execution. The brokerage firms providing such services may be paid commissions in excess of those another broker or dealer might charge for executing such transactions. We may execute such transactions resulting in receipt of brokerage and research services, notwithstanding that the particular account(s) involved may not be a beneficiary of such brokerage or research. Receipt of research services and products from brokers or dealers who execute client trades involves conflicts of interest for Wilmington Trust, its affiliates and its sub-advisors because they do not have to produce or pay for the research itself, and thus have an incentive to select or recommend a broker based on their interest in receiving such research.

**Pricing and Valuation**

Details of transaction charges and commissions are displayed on transaction confirmations, which have been mailed or made available separately to you. Wilmington Trust will also send you this information upon request. To the extent Wilmington Trust has custody of assets but no investment authority over your account, you have the right at any time to receive, at no additional cost to you, written confirmations of securities transactions that occur in your account. These confirmations will be mailed to you in the timeframe required by applicable regulations. Even if you previously waived your right to receive these confirmations, you may at any time ask to receive such confirmations going forward. Please contact your Relationship Manager if you wish to have written trade confirmations mailed to you.

If we are managing the assets in this account, please contact your Relationship Manager if there have been any changes to your financial situation or investment objectives, or if you wish to impose any reasonable restrictions that might affect the management of this account, or reasonably change any existing restrictions.

The investment values and estimated income information reported herein reflect the securities in your account on a trade date basis as of the close of your statement period. Pricing may reflect market price quotations, closing price, mean bid / ask price, or estimated market values obtained from various third-party quotation services which we believe to be reliable and which were available when the report was prepared. If an investment did not have a readily determinable value, then reported values are based on the last valuation available to us at the time the report was generated. For assets not custodied at Wilmington Trust, prices and values are provided by the custodian, the issuer or their administrator, and Wilmington Trust is not responsible for this information, nor can Wilmington Trust guarantee its accuracy or timeliness. Valuation for Private Equity, Private Real Estate and Other asset classes reflect the most recent information available, but are typically illiquid and may have irregular reporting. Consult your Relationship Manager for details regarding valuations for your illiquid holdings.

Reported values may not equal market value or fair value and may include accruals. Asset values will fluctuate. This report should not be used to prepare tax documents or financial statements. Information for tax reporting purposes will be reflected in your annual Wilmington Trust Tax Information Letter. Please contact your Relationship Manager if you have any questions.

**Basis and limitations on use for Cost, Gains, and Losses.** This is not a tax document. This information is being provided for your review of transactions and balances in your account for the reporting period. For tax reporting, you should rely on your official tax documents. Transactions requiring tax consideration should be reviewed with your tax advisor. Unrealized Gain and Loss data is reliant upon accurate cost basis information and represents the current value of a security less the adjusted cost basis for that security. If the current value is greater than the adjusted cost basis, that position has an unrealized gain. Conversely, if value is less than cost, the position carries an unrealized loss.

The cost basis of record for securities transferred into your Wilmington Trust account may have been provided to us by a delivering firm, a transfer agent, or another adviser on a best efforts basis. Cost basis data provided through delivering firms is relied upon for this report but should be reviewed for accuracy by each client. Cost basis on fixed income securities are adjusted for amortization, accretion, or principal paydowns and the method of calculation is based upon the type of fixed income security and certain attributes, obtained from sources believed to be reliable. Where no cost basis is available for a security as of the last day of the reporting period, that security will reflect zero as the cost basis.

**Investments: • Are NOT FDIC-Insured • Have NO Bank Guarantee • May Lose Value**

## Glossary

**Accrued Dividend** represents dividends declared by the issuer which have not yet been paid.

**Accrued Income** represents income payments accumulated with a security (i.e., "priced in" to the security value) since the last payment date but not yet received. Income accrues daily and is reset every time accruals are paid.

**Cost** represents the reported original value of an asset adjusted for corporate actions, including stock splits, dividends, and return of capital distributions. Tax cost basis on fixed income securities are adjusted for amortization, accretion or principal paydowns. The method of calculation is based upon the type of fixed income security and certain attributes, obtained from sources believed to be reliable. This information is used to estimate capital gains and losses; however, this is not a tax document. This information is being provided for your convenience and is for informational purposes only. For tax reporting, you should rely on your official tax documents. Transactions requiring tax consideration should be reviewed with your tax advisor.

Securities acquired before 2011 are generally not subject to the new cost basis reporting rules set forth by the Internal Revenue Service Code in the Emergency Economic Stabilization Act of 2008 and are, therefore, considered "noncovered" under the new cost basis reporting rules. All other securities in this section are securities which are "covered" under the new cost basis reporting rules. Securities which are "covered" under the new cost basis reporting rules are defined as securities which have been acquired on or after their applicable dates at which they are subject to the cost basis reporting rules and the adjusted basis will be reported to the IRS on form 1099-B for the applicable tax year in which the security is disposed.

**Credit ratings** are used to evaluate the likelihood of default by a bond issuer. Independent rating agencies, such as Moody's Investors Service, analyze the financial strength of each bond's issuer. Moody's ratings range from Aaa (highest quality) to C (lowest quality). Bonds rated Baa3 and better are considered "Investment Grade". Bonds rated Ba1 and below are "Speculative Grade" (also "High Yield"). The **Weighted Average Credit Rating** reflects a portfolio-weighted average of ratings on individual rated bonds – non-rated bonds are excluded – it does not represent a rating of the portfolio as a whole. The weighted average is intended only as an aggregate illustration of the portfolio holdings rather than as an indication of their respective risks, as certain risks –including the risk of default of individual issues– may be underrepresented by this measure.

**Duration** is a measure of a bond's sensitivity to changes in interest rates and is calculated as the average percentage change in a bond's value under parallel shifts of the yield curve. Thus a bond with

duration of 4 would be expected to lose 1% in value (price) in the event of a 25 basis point (0.25%) increase in market rates, represented by the yield curve. Conversely, that bond would be expected to appreciate 1% in value with a 25 basis point decrease in market rates.

**Estimated Annual Income** is an indication of income return expected from security positions over the next 12 months assuming that the position quantities, interest /dividend rates, and prices remain constant. For U.S. government, corporate, and municipal bonds it is calculated by multiplying the coupon rate by the face value of the security. For common stocks, ADRs, REITs and mutual funds it is calculated using an indicated (projected) annual dividend. They are provided for illustrative purposes only, are not a forecast or guarantee of future results, and they should not be relied on for making investment, trading, or tax decisions.

**Estimated Yield** compares the anticipated earnings on investments (Estimated Annual Income) to the current price of the investments. Changes in the price of a security over time or in the amount of the investment held in your account will cause the estimated yield to vary. The actual yield may be higher or lower than the estimated amounts.

**Net Interest** represents the receipt of interest earned less the purchase of accrued interest on securities.

**Taxable** versus **Tax-exempt** status is determined at the security level, and not at the account type level. Thus accounts that carry a tax exemption, such as IRAs or various charitable trusts, often have holdings that are categorized as Taxable for this report. Conversely, securities classified as Tax-exempt for this report are held in taxable account types. Securities may be deemed Tax-exempt based on a tax-advantaged treatment, typically for interest payments on municipal bonds, which may not be available equally to all investors. Additionally, alternative tax treatments may mitigate or offset tax advantages reflected in this report. This report is not a tax document and should not be used for tax preparation.

**Term (Long or Short)** reflects the holding period of the security. Long term indicates a holding period one year or greater, while Short indicates a holding period less than one year.

**Trade Date** accounting is used throughout this report, unless otherwise identified, and records the purchase or sale of an asset as of the date on which an agreement to purchase/sell was entered, or a market trade executed, rather than on the settlement date (the actual delivery of the asset in exchange for payment). Thus, trades executed but pending settlement are treated as already present in the account in reliance upon successful settlement. Trade date treatment serves as a better

**Glossary** *(continued)*

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reflection of actual decisions to buy/sell than settlement date, which can occur days later.

**Unit Cost** is the reported cost per share of an equity position, or cost per bond for debt securities. It reflects the price paid, adjusted for corporate actions such as stock splits and return of capital distributions. It is used to estimate capital gains and losses; however, you should rely only on your official tax documents for tax reporting purposes. All cost basis information is derived from transactions in the account or information supplied by you or other sources and is provided for your convenience and is for informational purposes only. There is no guarantee as to the accuracy of third-party cost basis information and it is not intended for tax reporting purposes. Please inform us in the event that a cost basis is not accurate.

**Unrealized Gain/Loss** is the difference between the current value of a security and the adjusted cost basis of that security. If the current value is greater than the original cost, that position has an unrealized gain. Conversely, if the current value is less than the original cost, that position has an unrealized loss.

**Yield to Worst** assumes the "worst case" yield to investors within the terms of the issue's provisions, such as use of prepayment, call, or sinking fund options that may be available to the issuer on some bonds.

MX6F96590802 ATLANTIC COUNTY JIF

03/31/2024

Shares/Par	Description	Price	Cost	Net Income	Market Value	Percent Of Total	Net Unrealized
Security ID	Link Ref	Local/Base	Local/Base	Receivable	Local/Base		Gain/Loss
				Local/Base			Local/Base

**UNIT OF PARTICIPATION**
**U.S. DOLLAR**
**UNITED STATES**

2,092,067.764	MEL JCM I ACCOUNT	9.7494	20,396,434.75	0.00	20,396,434.75		0.00
99VVB5Y75		9.7494	20,396,434.75	0.00	20,396,434.75	100.00	0.00



**Statement of Change in Net Assets  
Market Value**
**03/31/2024**

	Current Period		Fiscal Year To Date	
	03/01/2024	03/31/2024	01/01/2024	03/31/2024
<b>NET ASSETS - BEGINNING OF PERIOD</b>		<b>20,318,090.99</b>		<b>20,334,047.19</b>
		<u>20,318,090.99</u>		<u>20,334,047.19</u>
<b>RECEIPTS</b>				
<b>INVESTMENT INCOME</b>				
<b>INTEREST</b>	39,974.09		112,509.90	
<b>UNREALIZED GAIN/LOSS-INVESTMENT</b>	39,611.68		-46,375.89	
<b>ACCRETION/AMORTIZATION</b>	967.93		9,835.87	
<b>TOTAL INVESTMENT INCOME</b>		<u>80,553.70</u>		<u>75,969.88</u>
<b>TOTAL RECEIPTS</b>		<u>80,553.70</u>		<u>75,969.88</u>
<b>DISBURSEMENTS</b>				
<b>ADMINISTRATIVE EXPENSES</b>				
<b>TRUSTEE/CUSTODIAN</b>	509.99		1,528.09	
<b>INVESTMENT ADVISORY FEES</b>	1,189.96		10,526.14	
<b>CONSULTING</b>	509.99		1,528.09	
<b>TOTAL ADMINISTRATIVE EXPENSES</b>		<u>2,209.94</u>		<u>13,582.32</u>
<b>TOTAL DISBURSEMENTS</b>		<u>2,209.94</u>		<u>13,582.32</u>
<b>NET ASSETS - END OF PERIOD</b>		<u><u>20,396,434.75</u></u>		<u><u>20,396,434.75</u></u>

**Transaction Detail**  
**Reported By Transaction Category**

MX6F96590802 - ATLANTIC COUNTY JIF

03/01/2024 - 03/31/2024

Trans Code	Shares/Par	Description	Trade Date	Price	Cost	Amount	Net Gain/Loss
Link Ref	Security Id	Broker	C. Settle Date	Local/Base	Local/Base	Local/Base	Local/Base
Transaction No./Client Ref No.			Reported Date				

**RECEIPTS AND DISBURSEMENT TRANSACTIONS**

**AMORTIZATION/ACCRETION**

**U.S. DOLLAR**

BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	368.90	0.00	0.00
	99VVB5Y75	AMORIZATION/ACCRETION INCOME	03/01/2021	0.000000	368.90	0.00	0.00
		20240405O000030	03/29/2024				

BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	322.79	0.00	0.00
	99VVB5Y75	AMORIZATION/ACCRETION INCOME	03/01/2021	0.000000	322.79	0.00	0.00
		20240405O000090	03/29/2024				

BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	276.24	0.00	0.00
	99VVB5Y75	AMORIZATION/ACCRETION INCOME	10/01/2021	0.000000	276.24	0.00	0.00
		20240405O000150	03/29/2024				

<b>TOTAL U.S. DOLLAR AMORTIZATION/ACCRETION:</b>				<b>967.93</b>	<b>0.00</b>	<b>0.00</b>
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				<b>967.93</b>	<b>0.00</b>	<b>0.00</b>
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<b>TOTAL AMORTIZATION/ACCRETION RECEIPTS AND DISBURSEMENT TRANSACTIONS:</b>				<b>967.93</b>	<b>0.00</b>	<b>0.00</b>
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**FUND ALLOCATED EARNINGS**

**U.S. DOLLAR**

BVA	0.000	MEL JCM I ACCOUNT	03/31/2024	0.000000	-0.16	0.00	0.00
	99VVB5Y75	UGL ADJ 033124	03/01/2021	0.000000	-0.16	0.00	0.00
		20240405A000190	03/31/2024				

BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	15,096.97	0.00	0.00
	99VVB5Y75	UNREALIZED GAIN/LOSS	03/01/2021	0.000000	15,096.97	0.00	0.00
		20240405O000010	03/29/2024				

**Transaction Detail**  
**Reported By Transaction Category**

Trans Code Link Ref	Shares/Par Security Id	Description Broker	Trade Date C. Settle Date Reported Date	Price Local/Base	Cost Local/Base	Amount Local/Base	Net Gain/Loss Local/Base
		Transaction No./Client Ref No.					
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	15,235.03	0.00	0.00
	99VVB5Y75	INTEREST INCOME	03/01/2021	0.000000	15,235.03	0.00	0.00
		202404050000020	03/29/2024				
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	-194.37	0.00	0.00
	99VVB5Y75	TRUSTEE/CUSTODN FEES	03/01/2021	0.000000	-194.37	0.00	0.00
		202404050000040	03/29/2024				
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	-453.52	0.00	0.00
	99VVB5Y75	INVEST MANAGER FEES	03/01/2021	0.000000	-453.52	0.00	0.00
		202404050000050	03/29/2024				
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	-194.37	0.00	0.00
	99VVB5Y75	CONSULTING FEES	03/01/2021	0.000000	-194.37	0.00	0.00
		202404050000060	03/29/2024				
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	13,209.85	0.00	0.00
	99VVB5Y75	UNREALIZED GAIN/LOSS	03/01/2021	0.000000	13,209.85	0.00	0.00
		202404050000070	03/29/2024				
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	13,330.65	0.00	0.00
	99VVB5Y75	INTEREST INCOME	03/01/2021	0.000000	13,330.65	0.00	0.00
		202404050000080	03/29/2024				
BVA	0.000	MEL JCFI ACCOUNT	03/29/2024	0.000000	-170.07	0.00	0.00
	99VVB5Y75	TRUSTEE/CUSTODN FEES	03/01/2021	0.000000	-170.07	0.00	0.00
		202404050000100	03/29/2024				

Trans Code Link Ref	Shares/Par Security Id	Description Broker	Trade Date C. Settle Date Reported Date	Price Local/Base	Cost Local/Base	Amount Local/Base	Net Gain/Loss Local/Base
		Transaction No./Client Ref No.					
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	-396.83	0.00	0.00
	99VVB5Y75	INVEST MANAGER FEES	03/01/2021	0.000000	-396.83	0.00	0.00
		202404050000110	03/29/2024				
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	-170.07	0.00	0.00
	99VVB5Y75	CONSULTING FEES	03/01/2021	0.000000	-170.07	0.00	0.00
		202404050000120	03/29/2024				
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	11,305.02	0.00	0.00
	99VVB5Y75	UNREALIZED GAIN/LOSS	10/01/2021	0.000000	11,305.02	0.00	0.00
		202404050000130	03/29/2024				
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	11,408.41	0.00	0.00
	99VVB5Y75	INTEREST INCOME	10/01/2021	0.000000	11,408.41	0.00	0.00
		202404050000140	03/29/2024				
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	-145.55	0.00	0.00
	99VVB5Y75	TRUSTEE/CUSTODN FEES	10/01/2021	0.000000	-145.55	0.00	0.00
		202404050000160	03/29/2024				
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	-339.61	0.00	0.00
	99VVB5Y75	INVEST MANAGER FEES	10/01/2021	0.000000	-339.61	0.00	0.00
		202404050000170	03/29/2024				
BVA	0.000	MEL JCM I ACCOUNT	03/29/2024	0.000000	-145.55	0.00	0.00
	99VVB5Y75	CONSULTING FEES	10/01/2021	0.000000	-145.55	0.00	0.00
		202404050000180	03/29/2024				

<b>TOTAL U.S. DOLLAR FUND ALLOCATED EARNINGS:</b>	<b>77,375.83</b>	<b>0.00</b>	<b>0.00</b>
	<b>77,375.83</b>	<b>0.00</b>	<b>0.00</b>

**Transaction Detail**  
**Reported By Transaction Category**

**MXGF96590802 - ATLANTIC COUNTY JIF**

03/01/2024 - 03/31/2024

Trans Code	Shares/Par	Description	Trade Date	Price	Cost	Amount	Net Gain/Loss
Link Ref	Security Id	Broker	C. Settle Date	Local/Base	Local/Base	Local/Base	Local/Base
		Transaction No./Client Ref No.	Reported Date				
<b>TOTAL FUND ALLOCATED EARNINGS RECEIPTS AND DISBURSEMENT TRANSACTIONS:</b>				<b>77,375.83</b>	<b>0.00</b>	<b>0.00</b>	
<b>TOTAL RECEIPTS AND DISBURSEMENT TRANSACTIONS:</b>				<b>78,343.76</b>	<b>0.00</b>	<b>0.00</b>	
<b>TOTAL TRANSACTIONS BASE:</b>				<b>78,343.76</b>	<b>0.00</b>	<b>0.00</b>	

***SECTION B***

***CLAIMS***

***PAYMENTS***

***&***

***SUBROGATION***

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND  
SUMMARY OF CASH TRANSACTIONS - ALL FUND YEARS COMBINED**

Current Fund Year: 2024 Month Ending: March		Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL
OPEN BALANCE	808,364.76	6,763,661.39	1,399,028.93	13,334,627.82	(5,716.10)	8,698,963.88	204,183.07	(232,418.08)	(90,814.50)	15,739,917.44	2,920,662.38	49,540,461.00	
<b>RECEIPTS</b>													
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Refunds	68,278.05	0.00	0.00	3,021.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,299.05
Invest Pymnts	1,731.93	14,491.28	2,997.46	28,569.70	0.00	18,637.71	0.00	0.00	0.00	33,723.08	6,257.58	106,408.74	
Invest Adj	15.75	131.82	27.27	259.89	0.00	169.53	0.00	0.00	0.00	306.77	56.92	967.95	
Subtotal Invest	1,747.68	14,623.10	3,024.73	28,829.59	0.00	18,807.24	0.00	0.00	0.00	34,029.85	6,314.50	107,376.69	
Other *	639.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	639.70	
<b>TOTAL</b>	<b>70,665.43</b>	<b>14,623.10</b>	<b>3,024.73</b>	<b>31,850.59</b>	<b>0.00</b>	<b>18,807.24</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>34,029.85</b>	<b>6,314.50</b>	<b>179,315.44</b>	
<b>EXPENSES</b>													
Claims Transfers	41,217.94	65,772.23	15,126.27	466,089.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	588,205.98
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	274,510.72	0.00	0.00	274,510.72
Other *	3,330.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,330.00
<b>TOTAL</b>	<b>44,547.94</b>	<b>65,772.23</b>	<b>15,126.27</b>	<b>466,089.54</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>274,510.72</b>	<b>0.00</b>	<b>0.00</b>	<b>866,046.70</b>
<b>END BALANCE</b>	<b>834,482.25</b>	<b>6,712,512.26</b>	<b>1,386,927.39</b>	<b>12,900,388.87</b>	<b>(5,716.10)</b>	<b>8,717,771.12</b>	<b>204,183.07</b>	<b>(232,418.08)</b>	<b>(90,814.50)</b>	<b>15,499,436.57</b>	<b>2,926,976.88</b>	<b>48,853,729.74</b>	

**REPORT STATUS SECTION**

<b>Report Month: March</b>		<b>Balance Differences</b>	
Opening Balances:	Opening Balances are NOT equal		-\$4.75
Imprest Transfers:	Imprest Totals are equal		\$0.00
Investment Balances:	Investment Payment Balances are equal		\$0.00
	Investment Adjustment Balances are equal		\$0.00
Ending Balances:	Ending Balances are NOT equal		-\$4.72
Accrual Balances:	Accrual Balances are equal		\$0.00
 Claims Transaction Status:			
Allocation variance 1:	Daily xactions add to monthly totals		0.00
Allocation variance 2:	Monthly transactions and allocation totals are equal		0.00
Allocation variance 3:	Treasurer/TPA net / Max/Min	0.00	(0.00)
Pre-existing variance:	No prior unreconci / Max/Min	0.00	0.00



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Bank Account: ATLANTIC CNTY JIF IV

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45337    Check Date: 03/05/2024    Payee Name: GOLDENBERG, MACKLER &amp; SAYEGH, PA</b>							
2023285861	INDEMNITY	10/12/2022	OCEAN CITY	I-ASSESSMENT-W.C. IND	\$4,635.00	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$4,635.00</b>	
<b>Check Number: 45338    Check Date: 03/05/2024    Payee Name: STATE SHORTHAND REPORTING SERVICE</b>							
2023285861	INDEMNITY	10/12/2022	OCEAN CITY	E-MISC LEGAL EXPENSE WC	\$75.00	2022-2022	Expense
					<b>Check Amount:</b>	<b>\$75.00</b>	
<b>Check Number: 45339    Check Date: 03/05/2024    Payee Name: RELI OF ATLANTIC COUNTY, INC.</b>							
2024327605	1ST PARTY COLL PD	02/09/2024	PLEASANTVILLE CITY	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$4,875.90	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$4,875.90</b>	
<b>Check Number: 45340    Check Date: 03/05/2024    Payee Name: BEST MED CONSULTANTS, PA</b>							
2022276965	INDEMNITY	06/24/2022	WILDWOOD CITY	E-ALLOCATED MED EXAM WC	\$1,100.00	2022-2022	Expense
					<b>Check Amount:</b>	<b>\$1,100.00</b>	
<b>Check Number: 45341    Check Date: 03/05/2024    Payee Name: I C U INVESTIGATIONS INC</b>							
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	E-INDEP ADJUSTOR WC	\$475.00	2023-2023	Expense
					<b>Check Amount:</b>	<b>\$475.00</b>	
<b>Check Number: 45342    Check Date: 03/05/2024    Payee Name: BIRCHMEIER &amp; POWELL LLC</b>							
2021215929	BODILY INJURY	07/17/2020	WILDWOOD CITY	L-LEGAL GL	\$5,508.90	2020-2020	Legal
2021240701	POLICE PROF BI	06/05/2021	OCEAN CITY	L-LEGAL GL	\$3,000.00	2021-2021	Legal
2022243939	BODILY INJURY	06/28/2021	CAPE MAY CITY	L-LEGAL GL	\$4,576.25	2021-2021	Legal
					<b>Check Amount:</b>	<b>\$13,085.15</b>	
<b>Check Number: 45343    Check Date: 03/05/2024    Payee Name: State of New Jersey - Div of Worker's Comp</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	E-MISC ALL OTHER WC	\$0.69	2022-2022	Expense
2023299800	INDEMNITY	03/21/2023	LOWER TOWNSHIP	E-MISC ALL OTHER WC	\$4.04	2023-2023	Expense
2024312669	INDEMNITY	09/03/2023	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$0.69	2023-2023	Expense
					<b>Check Amount:</b>	<b>\$5.42</b>	
<b>Check Number: 45344    Check Date: 03/05/2024    Payee Name: ATLANTIC SECURITY INT'L</b>							
2024311689	MEDICAL ONLY	08/20/2023	NORTH WILDWOOD CITY	E-SUBROGATION EXPENSE WC	\$151.50	2023-2023	Expense
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	E-MISC ALL OTHER WC	\$2,385.00	2024-2024	Expense





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Amount:</b>					<b>\$2,536.50</b>		
<b>Check Number: 45345      Check Date: 03/05/2024      Payee Name: LEO S PETETTI LLC</b>							
2024322404	COMPREHENSIVE	12/21/2023	GALLOWAY TOWNSHIP	E-APPRAISERS PR	\$55.00	2023-2023	Expense
2024327605	1ST PARTY COLL PD	02/09/2024	PLEASANTVILLE CITY	E-APPRAISERS PR	\$135.00	2024-2024	Expense
<b>Check Amount:</b>					<b>\$190.00</b>		
<b>Check Number: 45346      Check Date: 03/05/2024      Payee Name: DAVID S DEWEESE</b>							
2024323373	EPL PI	12/29/2023	ABSECON CITY	L-LEGAL GL	\$750.00	2023-2023	Legal
<b>Check Amount:</b>					<b>\$750.00</b>		
<b>Check Number: 45347      Check Date: 03/05/2024      Payee Name: NJ MEDIATOR RESOLUTION</b>							
2023279451	GL PROPERTY DAMAGE	08/15/2020	OCEAN CITY	E-MISC ALL OTHER GL	\$1,000.00	2020-2020	Expense
<b>Check Amount:</b>					<b>\$1,000.00</b>		
<b>Check Number: 45348      Check Date: 03/05/2024      Payee Name: AFFANATO MARUT LLC</b>							
2021220136	INDEMNITY	11/11/2020	MILLVILLE CITY	L-LEGAL WC	\$161.00	2020-2020	Legal
2021221090	INDEMNITY	11/16/2020	VENTNOR CITY	L-LEGAL WC	\$112.00	2020-2020	Legal
2021222460	INDEMNITY	12/04/2020	MIDDLE TOWNSHIP	L-LEGAL WC	\$196.00	2020-2020	Legal
2021225173	INDEMNITY	01/03/2021	LOWER TOWNSHIP	L-LEGAL WC	\$308.00	2021-2021	Legal
2021237844	INDEMNITY	05/15/2021	HAMILTON TOWNSHIP	L-LEGAL WC	\$196.00	2021-2021	Legal
2021238003	INDEMNITY	05/17/2021	VENTNOR CITY	L-LEGAL WC	\$217.50	2021-2021	Legal
2022250708	INDEMNITY	10/05/2021	MILLVILLE CITY	L-LEGAL WC	\$184.00	2021-2021	Legal
2022257863	INDEMNITY	12/18/2021	PLEASANTVILLE CITY	L-LEGAL WC	\$140.00	2021-2021	Legal
2022261128	INDEMNITY	01/13/2022	OCEAN CITY	L-LEGAL WC	\$150.00	2022-2022	Legal
2023279027	INDEMNITY	07/25/2022	SOMERS POINT CITY	L-LEGAL WC	\$406.00	2022-2022	Legal
2023282901	INDEMNITY	09/12/2022	LOWER TOWNSHIP	L-LEGAL WC	\$203.50	2022-2022	Legal
2023285861	INDEMNITY	10/12/2022	OCEAN CITY	L-LEGAL WC	\$210.00	2022-2022	Legal
2023294583	INDEMNITY	01/03/2023	NORTH WILDWOOD CITY	L-LEGAL WC	\$667.00	2023-2023	Legal
2023295448	INDEMNITY	01/27/2023	PLEASANTVILLE CITY	L-LEGAL WC	\$140.00	2023-2023	Legal
2023297803	INDEMNITY	03/02/2023	NORTHFIELD CITY	L-LEGAL WC	\$182.00	2023-2023	Legal
2023299393	INDEMNITY	03/11/2023	OCEAN CITY	L-LEGAL WC	\$126.00	2023-2023	Legal
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	L-LEGAL WC	\$446.00	2023-2023	Legal
2024310137	INDEMNITY	07/28/2023	VENTNOR CITY	L-LEGAL WC	\$330.50	2023-2023	Legal

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 157



**Check Register**  
 Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024312936	INDEMNITY	09/07/2023	BRIGANTINE CITY	L-LEGAL WC	\$285.00	2023-2023	Legal
2024319133	INDEMNITY	10/27/2023	PLEASANTVILLE CITY	L-LEGAL WC	\$117.00	2023-2023	Legal
<b>Check Amount:</b>					<b>\$4,777.50</b>		
<b>Check Number: 45349    Check Date: 03/05/2024    Payee Name: CSR COURT REPORTING LLC</b>							
2021242058	BODILY INJURY	06/29/2021	SEA ISLE CITY	L-LEGAL GL	\$1,581.50	2021-2021	Legal
<b>Check Amount:</b>					<b>\$1,581.50</b>		
<b>Check Number: 45350    Check Date: 03/05/2024    Payee Name: JOEBOY INC T/A ACTION AUTO BODY</b>							
2024322404	COMPREHENSIVE	12/21/2023	GALLOWAY TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$2,548.03	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,548.03</b>		
<b>Check Number: 45351    Check Date: 03/05/2024    Payee Name: FOREST GROVE AUTO BODY</b>							
2024328182	1ST PARTY COLL PD	02/28/2024	MILLVILLE CITY	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$1,215.05	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,215.05</b>		
<b>Check Number: 45352    Check Date: 03/05/2024    Payee Name: PIETRAS SARACINO SMITH &amp; MEEK LLP</b>							
2021209739	INDEMNITY	07/12/2020	OCEAN CITY	L-LEGAL WC	\$160.00	2020-2020	Legal
2021228131	INDEMNITY	01/26/2021	OCEAN CITY	L-LEGAL WC	\$312.00	2021-2021	Legal
2021236152	INDEMNITY	04/27/2021	VENTNOR CITY	L-LEGAL WC	\$57.00	2021-2021	Legal
2023307650	INDEMNITY	05/27/2022	MIDDLE TOWNSHIP	L-LEGAL WC	\$181.50	2022-2022	Legal
<b>Check Amount:</b>					<b>\$710.50</b>		
<b>Check Number: 45353    Check Date: 03/05/2024    Payee Name: Byron, Peter</b>							
2023282229	INDEMNITY	08/31/2022	WILDWOOD CITY	I-PERMANENT PARTIAL DISABILITY	\$20,076.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$20,076.00</b>		
<b>Check Number: 45354    Check Date: 03/05/2024    Payee Name: STONE HARBOR BOROUGH</b>							
2023281071	INDEMNITY	08/22/2022	STONE HARBOR BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$1,154.98	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,154.98</b>		
<b>Check Number: 45355    Check Date: 03/05/2024    Payee Name: NAGEL RICE LLP</b>							
2022243939	BODILY INJURY	06/28/2021	CAPE MAY CITY	I-LUMP SUM SETTLEMENT GL BI	\$5,000.00	2021-2021	Loss
<b>Check Amount:</b>					<b>\$5,000.00</b>		
<b>Check Number: 45356    Check Date: 03/05/2024    Payee Name: MEL PROPERTY</b>							
2021225465	INLAND MARINE	12/25/2020	EGG HARBOR TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) OTR LOSS PR	\$944.92	2020-2020	Loss



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Amount:</b>					<b>\$944.92</b>		
<b>Check Number: 45357    Check Date: 03/05/2024    Payee Name: SEA ISLE CITY</b>							
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	I-TEMPORARY TOTAL DISABILITY	\$407.49	2024-2024	Loss
<b>Check Amount:</b>					<b>\$407.49</b>		
<b>Check Number: 45358    Check Date: 03/05/2024    Payee Name: CAPE MAY CITY</b>							
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	I-TEMPORARY TOTAL DISABILITY	\$1,561.74	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,561.74</b>		
<b>Check Number: 45359    Check Date: 03/05/2024    Payee Name: ROTHMAN ORTHOPAEDICS</b>							
2023294910	INDEMNITY	01/29/2023	HAMILTON TOWNSHIP	M-OTHER PROVIDER FEES	\$1,250.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,250.00</b>		
<b>Check Number: 45360    Check Date: 03/05/2024    Payee Name: BRIGANTINE CITY</b>							
2024315688	INDEMNITY	10/04/2023	BRIGANTINE CITY	I-TEMPORARY TOTAL DISABILITY	\$1,429.38	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,429.38</b>		
<b>Check Number: 45361    Check Date: 03/05/2024    Payee Name: Lower Township</b>							
2024319262	INDEMNITY	11/09/2023	LOWER TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,631.41	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,631.41</b>		
<b>Check Number: 45362    Check Date: 03/05/2024    Payee Name: PLEASANTVILLE CITY</b>							
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,198.00</b>		
<b>Check Number: 45363    Check Date: 03/05/2024    Payee Name: HAMILTON TOWNSHIP</b>							
2023294910	INDEMNITY	01/29/2023	HAMILTON TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,198.00</b>		
<b>Check Number: 45364    Check Date: 03/05/2024    Payee Name: HAMILTON TOWNSHIP</b>							
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,637.24	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,637.24</b>		
<b>Check Number: 45365    Check Date: 03/05/2024    Payee Name: VENTNOR CITY</b>							
2023290740	INDEMNITY	12/08/2022	VENTNOR CITY	I-TEMPORARY TOTAL DISABILITY	\$1,825.71	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,825.71</b>		
<b>Check Number: 45366    Check Date: 03/05/2024    Payee Name: PLEASANTVILLE CITY</b>							

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 159



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,262.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,262.00</b>		
<b>Check Number: 45367</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: UPPER TOWNSHIP</b>		
2024322063	INDEMNITY	12/18/2023	UPPER TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,740.82	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,740.82</b>		
<b>Check Number: 45368</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Francis Sutton</b>		
2021214761	INDEMNITY	09/15/2020	EGG HARBOR TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$308.90	2020-2020	Loss
<b>Check Amount:</b>					<b>\$308.90</b>		
<b>Check Number: 45369</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Owen Mastrocola</b>		
2021236549	INDEMNITY	04/30/2021	PLEASANTVILLE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,497.28	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,497.28</b>		
<b>Check Number: 45370</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Nicholas Hopwood</b>		
2023278204	INDEMNITY	07/13/2022	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$1,294.24	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,294.24</b>		
<b>Check Number: 45371</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Eric Munyon</b>		
2021237391	INDEMNITY	05/11/2021	GALLOWAY TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,480.52	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,480.52</b>		
<b>Check Number: 45372</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Lorna Robertson</b>		
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-PHARMACY	\$56.92	2023-2023	Loss
<b>Check Amount:</b>					<b>\$56.92</b>		
<b>Check Number: 45373</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Thomas Finnegan</b>		
2023285861	INDEMNITY	10/12/2022	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$13,999.48	2022-2022	Loss
<b>Check Amount:</b>					<b>\$13,999.48</b>		
<b>Check Number: 45374</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: Cody Miller</b>		
2021237286	INDEMNITY	05/09/2021	MILLVILLE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,177.44	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,177.44</b>		
<b>Check Number: 45375</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: William Burns</b>		
2022275475	INDEMNITY	06/06/2022	EGG HARBOR TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,198.40	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,198.40</b>		



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45376    Check Date: 03/05/2024    Payee Name: Thomas Ferrence</b>							
2021237523	INDEMNITY	05/11/2021	MIDDLE TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,219.64	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$1,219.64</b>	
<b>Check Number: 45377    Check Date: 03/05/2024    Payee Name: Elizabeth Fabik</b>							
2020202597	INDEMNITY	04/16/2020	NORTH WILDWOOD CITY	I-PERMANENT PARTIAL DISABILITY	\$1,120.00	2020-2020	Loss
					<b>Check Amount:</b>	<b>\$1,120.00</b>	
<b>Check Number: 45378    Check Date: 03/05/2024    Payee Name: Kenneth Kinsey</b>							
2022253534	INDEMNITY	10/29/2021	EGG HARBOR TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,265.20	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$1,265.20</b>	
<b>Check Number: 45379    Check Date: 03/05/2024    Payee Name: Ryan Hulme</b>							
2022271533	INDEMNITY	04/27/2022	STONE HARBOR BOROUGH	I-PERMANENT PARTIAL DISABILITY	\$1,157.40	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$1,157.40</b>	
<b>Check Number: 45380    Check Date: 03/05/2024    Payee Name: Jeremy Grouse</b>							
2021218482	INDEMNITY	10/22/2020	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$1,150.08	2020-2020	Loss
					<b>Check Amount:</b>	<b>\$1,150.08</b>	
<b>Check Number: 45381    Check Date: 03/05/2024    Payee Name: QUAL-LYNX</b>							
2024323331	MEDICAL ONLY	12/01/2023	SEA ISLE CITY	E-MISC ALL OTHER WC	\$4.25	2023-2023	Expense
					<b>Check Amount:</b>	<b>\$4.25</b>	
<b>Check Number: 45382    Check Date: 03/05/2024    Payee Name: ATLANTICARE PHYSICIAN GROUP, PA</b>							
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-PHYSICIAN FEES	\$173.53	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$173.53</b>	
<b>Check Number: 45383    Check Date: 03/05/2024    Payee Name: ATLANTICARE URGENT CARE &amp; OCCUPATIONAL HEALTH</b>							
2024312439	MEDICAL ONLY	08/25/2023	HAMILTON TOWNSHIP	M-URGENT CARE CENTER	\$247.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$247.00</b>	
<b>Check Number: 45384    Check Date: 03/05/2024    Payee Name: ATLANTICARE PHYSICIAN GROUP, PA</b>							
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-OCCUPATIONAL MEDICINE	\$248.43	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$248.43</b>	
<b>Check Number: 45385    Check Date: 03/05/2024    Payee Name: IVYREHAB NETWORK INC</b>							
2023304426	INDEMNITY	05/15/2023	OCEAN CITY	M-PHYSICIAN FEES	\$404.00	2023-2023	Loss



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024318880	INDEMNITY	11/03/2023	OCEAN CITY	M-PHYSICIAN FEES	\$255.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$659.00</b>		
<b>Check Number: 45386    Check Date: 03/05/2024    Payee Name: INSPIRA MEDICAL CENTER VINELAND</b>							
2023302818	MEDICAL ONLY	04/29/2023	MILLVILLE CITY	M-ACUTE CARE HOSPITAL	\$873.88	2023-2023	Loss
2024324562	MEDICAL ONLY	01/12/2024	MILLVILLE CITY	M-ACUTE CARE HOSPITAL	\$970.91	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,844.79</b>		
<b>Check Number: 45387    Check Date: 03/05/2024    Payee Name: ARMC ANESTHESIOLOGISTS</b>							
2021229497	INDEMNITY	02/10/2021	WILDWOOD CITY	M-PHYSICIAN FEES	\$672.00	2021-2021	Loss
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-PHYSICIAN FEES	\$672.00	2023-2023	Loss
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$560.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,904.00</b>		
<b>Check Number: 45388    Check Date: 03/05/2024    Payee Name: CAPE REGIONAL MEDICAL CENTER</b>							
2023304426	INDEMNITY	05/15/2023	OCEAN CITY	M-ACUTE CARE HOSPITAL	\$5,900.30	2023-2023	Loss
<b>Check Amount:</b>					<b>\$5,900.30</b>		
<b>Check Number: 45389    Check Date: 03/05/2024    Payee Name: OPHTHALMIC ASSOCIATES, PA</b>							
2024320016	MEDICAL ONLY	11/18/2023	DOWNE TOWNSHIP	M-PHYSICIAN FEES	\$143.87	2023-2023	Loss
<b>Check Amount:</b>					<b>\$143.87</b>		
<b>Check Number: 45390    Check Date: 03/05/2024    Payee Name: MID-ATLANTIC ANESTHESIA ASSOCIATES PA</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$663.60	2022-2022	Loss
<b>Check Amount:</b>					<b>\$663.60</b>		
<b>Check Number: 45391    Check Date: 03/05/2024    Payee Name: TWIN BORO PHYSICAL THERAPY ASSOCIATES PA</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$80.00	2020-2020	Loss
2023294910	INDEMNITY	01/29/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$240.00	2023-2023	Loss
2023305083	INDEMNITY	01/02/2020	LINWOOD CITY	M-PHYSICIAN FEES	\$240.00	2020-2020	Loss
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$160.00	2023-2023	Loss
2024319262	INDEMNITY	11/09/2023	LOWER TOWNSHIP	M-PHYSICIAN FEES	\$80.00	2023-2023	Loss
2024323003	INDEMNITY	01/02/2024	OCEAN CITY	M-PHYSICIAN FEES	\$240.00	2024-2024	Loss
2024324464	MEDICAL ONLY	01/22/2024	WILDWOOD CITY	M-PHYSICIAN FEES	\$240.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,280.00</b>		

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 102



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45392      Check Date: 03/05/2024      Payee Name: FERNANDO J. DELASOTTA MD</b>							
2021234332	INDEMNITY	04/05/2021	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$115.00	2021-2021	Loss
2023288635	INDEMNITY	11/09/2022	SOMERS POINT CITY	M-ORTHO/NEURO FEES	\$115.00	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$230.00</b>	
<b>Check Number: 45393      Check Date: 03/05/2024      Payee Name: CAPE EMERGENCY PHYSICIANS, PA</b>							
2024322698	INDEMNITY	12/28/2023	MIDDLE TOWNSHIP	M-PHYSICIAN FEES	\$1,327.44	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,327.44</b>	
<b>Check Number: 45394      Check Date: 03/05/2024      Payee Name: ONE CALL CARE DIAGNOSTICS</b>							
2022253534	INDEMNITY	10/29/2021	EGG HARBOR TOWNSHIP	M-MRI	\$75.00	2021-2021	Loss
2023294583	INDEMNITY	01/03/2023	NORTH WILDWOOD CITY	M-MRI	\$750.00	2023-2023	Loss
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-MRI	\$1,050.00	2023-2023	Loss
2024315985	INDEMNITY	10/05/2023	MILLVILLE CITY	M-MRI	\$75.00	2023-2023	Loss
2024319788	MEDICAL ONLY	11/17/2023	VENTNOR CITY	M-MRI	\$970.00	2023-2023	Loss
2024322698	INDEMNITY	12/28/2023	MIDDLE TOWNSHIP	M-MRI	\$635.00	2023-2023	Loss
2024323497	MEDICAL ONLY	01/10/2024	DENNIS TOWNSHIP	M-MRI	\$485.00	2024-2024	Loss
2024323671	INDEMNITY	01/10/2024	SEA ISLE CITY	M-MRI	\$485.00	2024-2024	Loss
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	M-MRI	\$485.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$5,010.00</b>	
<b>Check Number: 45395      Check Date: 03/05/2024      Payee Name: PROFESSIONAL PAIN MANAGEMENT ASSOC</b>							
2024312829	INDEMNITY	07/14/2023	SOMERS POINT CITY	M-PHYSICIAN FEES	\$90.68	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$90.68</b>	
<b>Check Number: 45396      Check Date: 03/05/2024      Payee Name: MATTHEW J PITERA MD PA</b>							
2022247283	INDEMNITY	09/05/2021	EGG HARBOR TOWNSHIP	M-BEHAVIORAL HEALTH	\$450.00	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$450.00</b>	
<b>Check Number: 45397      Check Date: 03/05/2024      Payee Name: ATLANTICARE SURGERY CENTER EHT</b>							
2023306945	INDEMNITY	05/31/2023	EGG HARBOR TOWNSHIP	M-AMBULATORY SURGERY CENTER	\$13.75	2023-2023	Loss
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	M-AMBULATORY SURGERY CENTER	\$1,394.84	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,408.59</b>	
<b>Check Number: 45398      Check Date: 03/05/2024      Payee Name: ROTHMAN ORTHOPAEDICS</b>							





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2023281071	INDEMNITY	08/22/2022	STONE HARBOR BOROUGH	M-ORTHO/NEURO FEES	\$114.84	2022-2022	Loss
<b>Check Amount:</b>					<b>\$114.84</b>		
<b>Check Number: 45399</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: ATLANTIC PHYSICAL THERAPY CENTER</b>		
2024315985	INDEMNITY	10/05/2023	MILLVILLE CITY	M-PHYSICIAN FEES	\$800.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$800.00</b>		
<b>Check Number: 45400</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: NovaCare Rehabilitation</b>		
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2022-2022	Loss
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2023-2023	Loss
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2024-2024	Loss
<b>Check Amount:</b>					<b>\$908.46</b>		
<b>Check Number: 45401</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: ATLANTIC RADIOLOGISTS PROFESSIONAL ASSOCIATION, LLC</b>		
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-PHYSICIAN FEES	\$101.37	2023-2023	Loss
<b>Check Amount:</b>					<b>\$101.37</b>		
<b>Check Number: 45402</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: CAPE REGIONAL URGENT CARE</b>		
2020207069	MEDICAL ONLY	06/05/2020	CAPE MAY CITY	M-PHYSICIAN FEES	\$58.09	2020-2020	Loss
2021219797	INDEMNITY	11/08/2020	UPPER TOWNSHIP	M-URGENT CARE CENTER	\$119.56	2020-2020	Loss
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-URGENT CARE CENTER	\$183.10	2023-2023	Loss
2024321303	MEDICAL ONLY	12/07/2023	OCEAN CITY	M-URGENT CARE CENTER	\$119.56	2023-2023	Loss
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-PHYSICIAN FEES	\$234.85	2024-2024	Loss
2024323497	MEDICAL ONLY	01/10/2024	DENNIS TOWNSHIP	M-URGENT CARE CENTER	\$170.77	2024-2024	Loss
2024323671	INDEMNITY	01/10/2024	SEA ISLE CITY	M-URGENT CARE CENTER	\$259.50	2024-2024	Loss
2024323799	MEDICAL ONLY	01/11/2024	OCEAN CITY	M-URGENT CARE CENTER	\$283.59	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,429.02</b>		
<b>Check Number: 45403</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: PREMIER ORTHOPAEDIC &amp; SPORTS MEDICINE ASSOCIATES OF SNJ LLC</b>		
2021214307	INDEMNITY	09/09/2020	EGG HARBOR TOWNSHIP	M-ORTHO/NEURO FEES	\$88.09	2020-2020	Loss
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-OCCUPATIONAL MEDICINE	\$176.18	2022-2022	Loss
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$88.09	2023-2023	Loss
2024319788	MEDICAL ONLY	11/17/2023	VENTNOR CITY	M-OCCUPATIONAL MEDICINE	\$88.09	2023-2023	Loss
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-ORTHO/NEURO FEES	\$196.00	2024-2024	Loss





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
					<b>Check Amount:</b>	<b>\$636.45</b>	
<b>Check Number: 45404</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: CAPE PHYSICAL THERAPY LLC</b>		
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$60.00	2022-2022	Loss
2023307686	INDEMNITY	06/23/2023	SEA ISLE CITY	M-PHYSICIAN FEES	\$240.00	2023-2023	Loss
2024312757	INDEMNITY	09/05/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$108.00	2023-2023	Loss
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	M-PHYSICIAN FEES	\$240.00	2023-2023	Loss
2024316251	MEDICAL ONLY	10/07/2023	WEST CAPE MAY BOROUGH	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024321646	MEDICAL ONLY	12/12/2023	LOWER TOWNSHIP	M-PHYSICIAN FEES	\$60.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$798.00</b>	
<b>Check Number: 45405</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: OPTUM URGENT CARE</b>		
2023290554	MEDICAL ONLY	12/07/2022	COMMERCIAL TOWNSHIP	M-URGENT CARE CENTER	\$164.80	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$164.80</b>	
<b>Check Number: 45406</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: MSC GROUP INC</b>		
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-DME/PROSTHETICS	\$831.50	2023-2023	Loss
2024322063	INDEMNITY	12/18/2023	UPPER TOWNSHIP	M-DME/PROSTHETICS	\$875.92	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,707.42</b>	
<b>Check Number: 45407</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: BAYFRONT EMERGENCY PHYSICIANS, PA</b>		
2023304058	INDEMNITY	04/28/2023	SOMERS POINT CITY	M-PHYSICIAN FEES	\$536.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$536.00</b>	
<b>Check Number: 45408</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: ADVANCED RADIOLOGY SOLUTIONS LLC</b>		
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-PHYSICIAN FEES	\$10.49	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$10.49</b>	
<b>Check Number: 45409</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: ATLANTICARE REGIONAL MEDICAL CENTER</b>		
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-ACUTE CARE HOSPITAL	\$11,405.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$11,405.00</b>	
<b>Check Number: 45410</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: ATLANTIC EMERGENCY ASSOCIATES KESSLER SED LLC</b>		
2024326243	MEDICAL ONLY	02/07/2024	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$522.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$522.00</b>	
<b>Check Number: 45411</b>			<b>Check Date: 03/05/2024</b>		<b>Payee Name: TOWNSHIP OF EGG HARBOR EMS</b>		



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024314661	MEDICAL ONLY	09/23/2023	EGG HARBOR TOWNSHIP	M-OTHER PROVIDER FEES	\$1,003.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,003.00</b>		
<b>Check Number: 45412    Check Date: 03/05/2024    Payee Name: WORKERS COMP PSYCH NET</b>							
2024316603	MEDICAL ONLY	10/09/2023	PLEASANTVILLE CITY	M-BEHAVIORAL HEALTH	\$170.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$170.00</b>		
<b>Check Number: 45413    Check Date: 03/05/2024    Payee Name: NEUROSURGICAL AND SPINE SPECIALIST LLC</b>							
2024312757	INDEMNITY	09/05/2023	STONE HARBOR BOROUGH	M-ORTHO/NEURO FEES	\$144.35	2023-2023	Loss
<b>Check Amount:</b>					<b>\$144.35</b>		
<b>Check Number: 45414    Check Date: 03/05/2024    Payee Name: FUSION HEALTHCARE SOLUTIONS</b>							
2021236152	INDEMNITY	04/27/2021	VENTNOR CITY	M-DME/PROSTHETICS	\$1,928.00	2021-2021	Loss
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	M-DME/PROSTHETICS	\$1,928.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$3,856.00</b>		
<b>Check Number: 45415    Check Date: 03/05/2024    Payee Name: KENNEDY CHERRY HILL SURGICAL CENTER, LLC</b>							
2024311634	MEDICAL ONLY	08/18/2023	STONE HARBOR BOROUGH	M-AMBULATORY SURGERY CENTER	\$6,758.50	2023-2023	Loss
<b>Check Amount:</b>					<b>\$6,758.50</b>		
<b>Check Number: 45416    Check Date: 03/05/2024    Payee Name: myMATRIX</b>							
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-PHARMACY	\$7.26	2023-2023	Loss
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	M-PHARMACY	\$30.19	2024-2024	Loss
<b>Check Amount:</b>					<b>\$37.45</b>		
<b>Check Number: 45417    Check Date: 03/05/2024    Payee Name: ORTHONJ, LLC</b>							
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	M-ORTHO/NEURO FEES	\$3,549.83	2022-2022	Loss
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$854.04	2023-2023	Loss
2024322363	MEDICAL ONLY	12/20/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$85.32	2023-2023	Loss
2024322698	INDEMNITY	12/28/2023	MIDDLE TOWNSHIP	M-ORTHO/NEURO FEES	\$186.38	2023-2023	Loss
2024323265	INDEMNITY	01/05/2024	LOWER TOWNSHIP	M-ORTHO/NEURO FEES	\$202.25	2024-2024	Loss
2024324531	INDEMNITY	01/18/2024	LOWER TOWNSHIP	M-ORTHO/NEURO FEES	\$125.59	2024-2024	Loss
2024326676	INDEMNITY	02/12/2024	MIDDLE TOWNSHIP	M-ORTHO/NEURO FEES	\$250.17	2024-2024	Loss
<b>Check Amount:</b>					<b>\$5,253.58</b>		
<b>Check Number: 45418    Check Date: 03/05/2024    Payee Name: ATLANTICARE CENTER FOR ORTHOPEDIC SURGERY</b>							

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 166



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2023281071	INDEMNITY	08/22/2022	STONE HARBOR BOROUGH	M-AMBULATORY SURGERY CENTER	\$479.31	2022-2022	Loss
<b>Check Amount:</b>					<b>\$479.31</b>		
<b>Check Number: 45419    Check Date: 03/05/2024    Payee Name: STRIVE PHYSICAL THERAPY SPECIALISTS LLC</b>							
2021236152	INDEMNITY	04/27/2021	VENTNOR CITY	M-PHYSICIAN FEES	\$360.00	2021-2021	Loss
2024310217	MEDICAL ONLY	07/29/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024315688	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024320831	MEDICAL ONLY	12/02/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$360.00	2023-2023	Loss
2024322903	MEDICAL ONLY	01/03/2024	VENTNOR CITY	M-PHYSICIAN FEES	\$270.00	2024-2024	Loss
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	M-PHYSICIAN FEES	\$270.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,250.00</b>		
<b>Check Number: 45420    Check Date: 03/05/2024    Payee Name: ORTHONJ, LLC</b>							
2024326243	MEDICAL ONLY	02/07/2024	HAMILTON TOWNSHIP	M-ORTHO/NEURO FEES	\$232.42	2024-2024	Loss
<b>Check Amount:</b>					<b>\$232.42</b>		
<b>Check Number: 45421    Check Date: 03/05/2024    Payee Name: SOUTH JERSEY REHAB &amp; SPINE INC</b>							
2021226252	INDEMNITY	01/14/2021	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$232.03	2021-2021	Loss
2021229497	INDEMNITY	02/10/2021	WILDWOOD CITY	M-PHYSICIAN FEES	\$1,782.03	2021-2021	Loss
2021233791	INDEMNITY	03/26/2021	GALLOWAY TOWNSHIP	M-PHYSICIAN FEES	\$144.35	2021-2021	Loss
2021234332	INDEMNITY	04/05/2021	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$144.35	2021-2021	Loss
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$1,300.00	2022-2022	Loss
2023295046	MEDICAL ONLY	01/22/2023	MIDDLE TOWNSHIP	M-PHYSICIAN FEES	\$144.35	2023-2023	Loss
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$2,040.00	2023-2023	Loss
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$376.38	2023-2023	Loss
<b>Check Amount:</b>					<b>\$6,163.49</b>		
<b>Check Number: 45422    Check Date: 03/05/2024    Payee Name: OSPREY REHABILITATION LLC</b>							
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$302.82	2023-2023	Loss
<b>Check Amount:</b>					<b>\$302.82</b>		



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45423    Check Date: 03/05/2024    Payee Name: ISO SERVICES INC</b>							
2024323331	MEDICAL ONLY	12/01/2023	SEA ISLE CITY	E-MISC ALL OTHER WC	\$13.75	2023-2023	Expense
					<b>Check Amount:</b>		<b>\$13.75</b>
<b>Check Number: 45424    Check Date: 03/05/2024    Payee Name: QUALCARE INC</b>							
2024327870	MEDICAL ONLY	02/26/2024	HAMILTON TOWNSHIP	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024327898	MEDICAL ONLY	02/27/2024	AVALON BOROUGH	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024327911	MEDICAL ONLY	02/27/2024	GALLOWAY TOWNSHIP	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024327912	MEDICAL ONLY	02/27/2024	MARGATE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024327988	MEDICAL ONLY	02/27/2024	MARGATE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024328083	MEDICAL ONLY	02/28/2024	SEA ISLE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
					<b>Check Amount:</b>		<b>\$3,390.00</b>
<b>Check Number: 45425    Check Date: 03/12/2024    Payee Name: CAPEHART &amp; SCATCHARD PA</b>							
2021233366	INDEMNITY	03/21/2021	GALLOWAY TOWNSHIP	L-LEGAL WC	\$307.50	2021-2021	Legal
2022267711	INDEMNITY	02/28/2021	UPPER TOWNSHIP	L-LEGAL WC	\$403.50	2021-2021	Legal
2023295249	INDEMNITY	01/27/2023	MILLVILLE CITY	L-LEGAL WC	\$390.50	2023-2023	Legal
2023301475	INDEMNITY	04/11/2023	GALLOWAY TOWNSHIP	L-LEGAL WC	\$371.50	2023-2023	Legal
2024318880	INDEMNITY	11/03/2023	OCEAN CITY	L-LEGAL WC	\$757.00	2023-2023	Legal
					<b>Check Amount:</b>		<b>\$2,230.00</b>
<b>Check Number: 45426    Check Date: 03/12/2024    Payee Name: COOPER LEVENSON, PA</b>							
2021215885	BODILY INJURY	09/05/2020	BRIGANTINE CITY	L-LEGAL GL	\$527.00	2020-2020	Legal
					<b>Check Amount:</b>		<b>\$527.00</b>
<b>Check Number: 45427    Check Date: 03/12/2024    Payee Name: GOLDENBERG, MACKLER &amp; SAYEGH, PA</b>							
2022246709	INDEMNITY	08/25/2021	ABSECON CITY	I-ASSESSMENT-W.C. IND	\$3,970.00	2021-2021	Loss
					<b>Check Amount:</b>		<b>\$3,970.00</b>
<b>Check Number: 45428    Check Date: 03/12/2024    Payee Name: STATE SHORTHAND REPORTING SERVICE</b>							
2022246709	INDEMNITY	08/25/2021	ABSECON CITY	E-MISC LEGAL EXPENSE WC	\$75.00	2021-2021	Expense
2023277935	INDEMNITY	07/11/2022	SOMERS POINT CITY	E-MISC LEGAL EXPENSE WC	\$75.00	2022-2022	Expense
					<b>Check Amount:</b>		<b>\$150.00</b>
<b>Check Number: 45429    Check Date: 03/12/2024    Payee Name: SOUTH JERSEY PHYSICIAN ASSOCS</b>							



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2023289340	INDEMNITY	11/18/2022	OCEAN CITY	E-ALLOCATED MED EXAM WC	\$800.00	2022-2022	Expense
					<b>Check Amount:</b>		<b>\$800.00</b>
<b>Check Number: 45430    Check Date: 03/12/2024    Payee Name: FERNANDO J. DELASOTTA MD</b>							
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-ORTHO/NEURO FEES	\$150.00	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$150.00</b>
<b>Check Number: 45431    Check Date: 03/12/2024    Payee Name: I C U INVESTIGATIONS INC</b>							
2021220436	1ST PARTY COLL PD	11/12/2020	GALLOWAY TOWNSHIP	E-SUBROGATION EXPENSE PR	\$150.00	2020-2020	Expense
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	E-INDEP ADJUSTOR WC	\$475.00	2024-2024	Expense
					<b>Check Amount:</b>		<b>\$625.00</b>
<b>Check Number: 45432    Check Date: 03/12/2024    Payee Name: BARKER GELFAND JAMES &amp; SERVAS A PROFESSIONAL CORPORATION</b>							
2022271345	POLICE PROF PI	01/05/2022	GALLOWAY TOWNSHIP	L-LEGAL GL	\$171.00	2022-2022	Legal
					<b>Check Amount:</b>		<b>\$171.00</b>
<b>Check Number: 45433    Check Date: 03/12/2024    Payee Name: D'ARCY JOHNSON DAY PC</b>							
2023277935	INDEMNITY	07/11/2022	SOMERS POINT CITY	I-CLAIMANT LEGAL EXP IND	\$6,283.00	2022-2022	Loss
					<b>Check Amount:</b>		<b>\$6,283.00</b>
<b>Check Number: 45434    Check Date: 03/12/2024    Payee Name: BIRCHMEIER &amp; POWELL LLC</b>							
2021217952	BODILY INJURY	07/27/2020	NORTH WILDWOOD CITY	L-LEGAL GL	\$4,959.40	2020-2020	Legal
2024308273	BODILY INJURY	03/23/2023	HAMILTON TOWNSHIP	L-LEGAL AL	\$153.00	2023-2023	Legal
					<b>Check Amount:</b>		<b>\$5,112.40</b>
<b>Check Number: 45435    Check Date: 03/12/2024    Payee Name: NEW JERSEY IME ASSOCIATES LLC</b>							
2023304043	INDEMNITY	05/12/2023	CAPE MAY CITY	E-ALLOCATED MED EXAM WC	\$1,000.00	2023-2023	Expense
					<b>Check Amount:</b>		<b>\$1,000.00</b>
<b>Check Number: 45436    Check Date: 03/12/2024    Payee Name: ARVIND BALIGA MD</b>							
2023277935	INDEMNITY	07/11/2022	SOMERS POINT CITY	I-ASSESSMENT-W.C. IND	\$1,000.00	2022-2022	Loss
					<b>Check Amount:</b>		<b>\$1,000.00</b>
<b>Check Number: 45437    Check Date: 03/12/2024    Payee Name: AFFANATO MARUT LLC</b>							
2021222549	INDEMNITY	12/04/2020	AVALON BOROUGH	L-LEGAL WC	\$168.00	2020-2020	Legal
2021225008	INDEMNITY	12/30/2020	SEA ISLE CITY	L-LEGAL WC	\$162.50	2020-2020	Legal
2021241757	INDEMNITY	06/24/2021	MILLVILLE CITY	L-LEGAL WC	\$280.00	2021-2021	Legal



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2022246709	INDEMNITY	08/25/2021	ABSECON CITY	L-LEGAL WC	\$392.00	2021-2021	Legal
2022258213	INDEMNITY	12/08/2021	EGG HARBOR TOWNSHIP	L-LEGAL WC	\$140.00	2021-2021	Legal
2022263037	INDEMNITY	01/30/2022	NORTHFIELD CITY	L-LEGAL WC	\$210.00	2022-2022	Legal
2022274446	INDEMNITY	05/26/2022	NORTH WILDWOOD CITY	L-LEGAL WC	\$315.00	2022-2022	Legal
2023277682	INDEMNITY	12/16/2021	ABSECON CITY	L-LEGAL WC	\$154.00	2021-2021	Legal
2023277935	INDEMNITY	07/11/2022	SOMERS POINT CITY	L-LEGAL WC	\$462.00	2022-2022	Legal
2023279959	INDEMNITY	08/02/2022	HAMILTON TOWNSHIP	L-LEGAL WC	\$238.00	2022-2022	Legal
2023288059	INDEMNITY	10/26/2022	EGG HARBOR TOWNSHIP	L-LEGAL WC	\$336.00	2022-2022	Legal
2023288295	INDEMNITY	11/03/2022	NORTHFIELD CITY	L-LEGAL WC	\$322.00	2022-2022	Legal
2023288635	INDEMNITY	11/09/2022	SOMERS POINT CITY	L-LEGAL WC	\$266.00	2022-2022	Legal
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	L-LEGAL WC	\$260.50	2022-2022	Legal
2023292297	INDEMNITY	09/07/2022	LOWER TOWNSHIP	L-LEGAL WC	\$336.50	2022-2022	Legal
2023299800	INDEMNITY	03/21/2023	LOWER TOWNSHIP	L-LEGAL WC	\$297.00	2023-2023	Legal
2024319262	INDEMNITY	11/09/2023	LOWER TOWNSHIP	L-LEGAL WC	\$117.00	2023-2023	Legal
<b>Check Amount:</b>					<b>\$4,456.50</b>		
<b>Check Number: 45438    Check Date: 03/12/2024    Payee Name: HOWARD HAMMER PSY D LLC</b>							
2021225008	INDEMNITY	12/30/2020	SEA ISLE CITY	M-PHYSICIAN FEES	\$165.00	2020-2020	Loss
<b>Check Amount:</b>					<b>\$165.00</b>		
<b>Check Number: 45439    Check Date: 03/12/2024    Payee Name: HOWARD HAMMER PSYD LLC</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	M-BEHAVIORAL HEALTH	\$20.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$20.00</b>		
<b>Check Number: 45440    Check Date: 03/12/2024    Payee Name: PIETRAS SARACINO SMITH &amp; MEEK LLP</b>							
2021240978	INDEMNITY	12/30/2020	EGG HARBOR TOWNSHIP	L-LEGAL WC	\$548.00	2020-2020	Legal
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	L-LEGAL WC	\$636.00	2022-2022	Legal
2022267947	INDEMNITY	03/16/2022	MILLVILLE CITY	L-LEGAL WC	\$2,537.50	2022-2022	Legal
2022273968	INDEMNITY	05/13/2022	MARGATE CITY	L-LEGAL WC	\$457.00	2022-2022	Legal
2022274827	INDEMNITY	05/31/2022	VENTNOR CITY	L-LEGAL WC	\$593.00	2022-2022	Legal
2023281071	INDEMNITY	08/22/2022	STONE HARBOR BOROUGH	L-LEGAL WC	\$893.50	2022-2022	Legal
2023292487	INDEMNITY	12/29/2022	SOMERS POINT CITY	L-LEGAL WC	\$413.00	2022-2022	Legal
2023292862	INDEMNITY	11/17/2022	EGG HARBOR TOWNSHIP	L-LEGAL WC	\$676.00	2022-2022	Legal

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 170



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2023293330	INDEMNITY	01/10/2023	CAPE MAY CITY	L-LEGAL WC	\$781.50	2023-2023	Legal
2023300449	INDEMNITY	03/24/2023	GALLOWAY TOWNSHIP	L-LEGAL WC	\$1,490.50	2023-2023	Legal
<b>Check Amount:</b>					<b>\$9,026.00</b>		
<b>Check Number: 45441    Check Date: 03/12/2024    Payee Name: LONGPORT BOROUGH</b>							
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$2,262.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,262.00</b>		
<b>Check Number: 45442    Check Date: 03/12/2024    Payee Name: OCEAN CITY</b>							
2024318880	INDEMNITY	11/03/2023	OCEAN CITY	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,198.00</b>		
<b>Check Number: 45443    Check Date: 03/12/2024    Payee Name: BRIGANTINE CITY</b>							
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,198.00</b>		
<b>Check Number: 45444    Check Date: 03/12/2024    Payee Name: MILLVILLE CITY</b>							
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,496.57	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,496.57</b>		
<b>Check Number: 45445    Check Date: 03/12/2024    Payee Name: CENTER FOR FORENSIC ECONOMIC</b>							
2022244737	BODILY INJURY	08/05/2021	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER AL	\$4,745.00	2021-2021	Expense
<b>Check Amount:</b>					<b>\$4,745.00</b>		
<b>Check Number: 45446    Check Date: 03/12/2024    Payee Name: MILLVILLE CITY</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$1,815.68	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,815.68</b>		
<b>Check Number: 45447    Check Date: 03/12/2024    Payee Name: MILLVILLE CITY</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$1,815.68	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,815.68</b>		
<b>Check Number: 45448    Check Date: 03/12/2024    Payee Name: MILLVILLE CITY</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,130.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$2,130.00</b>		
<b>Check Number: 45449    Check Date: 03/12/2024    Payee Name: WILDWOOD CITY</b>							
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	I-TEMPORARY TOTAL DISABILITY	\$281.58	2023-2023	Loss





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
					<b>Check Amount:</b>	<b>\$281.58</b>	
<b>Check Number: 45450    Check Date: 03/12/2024    Payee Name: MILLVILLE CITY</b>							
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$858.42	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$858.42</b>	
<b>Check Number: 45451    Check Date: 03/12/2024    Payee Name: STONE HARBOR BOROUGH</b>							
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$1,191.14	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,191.14</b>	
<b>Check Number: 45452    Check Date: 03/12/2024    Payee Name: OCEAN CITY</b>							
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	I-TEMPORARY TOTAL DISABILITY	\$2,262.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$2,262.00</b>	
<b>Check Number: 45453    Check Date: 03/12/2024    Payee Name: PLEASANTVILLE CITY</b>							
2024326524	INDEMNITY	02/09/2024	PLEASANTVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,262.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$2,262.00</b>	
<b>Check Number: 45454    Check Date: 03/12/2024    Payee Name: AVALON BOROUGH</b>							
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$586.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$586.00</b>	
<b>Check Number: 45455    Check Date: 03/12/2024    Payee Name: LOWER TOWNSHIP</b>							
2024323265	INDEMNITY	01/05/2024	LOWER TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$808.48	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$808.48</b>	
<b>Check Number: 45456    Check Date: 03/12/2024    Payee Name: UPPER TOWNSHIP</b>							
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,344.86	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$1,344.86</b>	
<b>Check Number: 45457    Check Date: 03/12/2024    Payee Name: Thomas Schurer</b>							
2022275826	INDEMNITY	06/05/2022	SEA ISLE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,136.00	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$1,136.00</b>	
<b>Check Number: 45458    Check Date: 03/12/2024    Payee Name: Micah O'Hara</b>							
2022246709	INDEMNITY	08/25/2021	ABSECON CITY	I-PERMANENT PARTIAL DISABILITY	\$14,534.00	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$14,534.00</b>	
<b>Check Number: 45459    Check Date: 03/12/2024    Payee Name: Larry Morgenstern</b>							





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2023277935	INDEMNITY	07/11/2022	SOMERS POINT CITY	I-PERMANENT PARTIAL DISABILITY	\$22,697.10	2022-2022	Loss
<b>Check Amount:</b>					<b>\$22,697.10</b>		
<b>Check Number: 45460    Check Date: 03/12/2024    Payee Name: Jeremy Grouse</b>							
2023281461	INDEMNITY	08/24/2022	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$1,136.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,136.00</b>		
<b>Check Number: 45461    Check Date: 03/12/2024    Payee Name: Christopher DeVito</b>							
2021214232	INDEMNITY	09/08/2020	GALLOWAY TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,235.60	2020-2020	Loss
<b>Check Amount:</b>					<b>\$1,235.60</b>		
<b>Check Number: 45462    Check Date: 03/12/2024    Payee Name: Gerhard Thoresen III</b>							
2022273096	INDEMNITY	05/13/2022	HAMILTON TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,136.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,136.00</b>		
<b>Check Number: 45463    Check Date: 03/12/2024    Payee Name: Rodrigo Pimentel</b>							
2022276919	INDEMNITY	06/26/2022	EGG HARBOR TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,278.12	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,278.12</b>		
<b>Check Number: 45464    Check Date: 03/12/2024    Payee Name: Thomas Schmidt</b>							
2022242474	INDEMNITY	07/08/2021	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$1,177.44	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,177.44</b>		
<b>Check Number: 45465    Check Date: 03/12/2024    Payee Name: VENTNOR CITY</b>							
2024328170	INLAND MARINE	01/03/2024	VENTNOR CITY	M-MISC MED(WC) & PD (NON-WC) OTR LOSS PR	\$5,850.74	2024-2024	Loss
<b>Check Amount:</b>					<b>\$5,850.74</b>		
<b>Check Number: 45466    Check Date: 03/12/2024    Payee Name: GALLOWAY TOWNSHIP</b>							
2024323241	1ST PARTY COLL PD	01/03/2024	GALLOWAY TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$168.80	2024-2024	Loss
<b>Check Amount:</b>					<b>\$168.80</b>		
<b>Check Number: 45467    Check Date: 03/12/2024    Payee Name: IVYREHAB NETWORK INC</b>							
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$345.00	2022-2022	Loss
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	M-PHYSICIAN FEES	\$260.00	2024-2024	Loss
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	M-PHYSICIAN FEES	\$255.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$860.00</b>		
<b>Check Number: 45468    Check Date: 03/12/2024    Payee Name: REGIONAL DIAGNOSTIC IMAGING, PA</b>							



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$134.68	2024-2024	Loss
<b>Check Amount:</b>					<b>\$134.68</b>		
<b>Check Number: 45469    Check Date: 03/12/2024    Payee Name: INSPIRA MEDICAL CENTER VINELAND</b>							
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-ACUTE CARE HOSPITAL	\$1,457.81	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,457.81</b>		
<b>Check Number: 45470    Check Date: 03/12/2024    Payee Name: SHORE MEDICAL CENTER</b>							
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	M-ACUTE CARE HOSPITAL	\$1,312.35	2022-2022	Loss
2024321509	INDEMNITY	12/11/2023	MARGATE CITY	M-ACUTE CARE HOSPITAL	\$765.75	2023-2023	Loss
2024322063	INDEMNITY	12/18/2023	UPPER TOWNSHIP	M-ACUTE CARE HOSPITAL	\$2,106.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$4,184.10</b>		
<b>Check Number: 45471    Check Date: 03/12/2024    Payee Name: CAPE REGIONAL MEDICAL CENTER</b>							
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-ACUTE CARE HOSPITAL	\$1,404.00	2023-2023	Loss
2024324099	INDEMNITY	01/16/2024	WILDWOOD CREST BOROUGH	M-ACUTE CARE HOSPITAL	\$1,404.00	2024-2024	Loss
2024324464	MEDICAL ONLY	01/22/2024	WILDWOOD CITY	M-ACUTE CARE HOSPITAL	\$440.74	2024-2024	Loss
2024326676	INDEMNITY	02/12/2024	MIDDLE TOWNSHIP	M-ACUTE CARE HOSPITAL	\$1,404.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$4,652.74</b>		
<b>Check Number: 45472    Check Date: 03/12/2024    Payee Name: TWIN BORO PHYSICAL THERAPY ASSOCIATES PA</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$80.00	2020-2020	Loss
2021238363	INDEMNITY	05/24/2021	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$320.00	2021-2021	Loss
2023294910	INDEMNITY	01/29/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$240.00	2023-2023	Loss
2023300629	INDEMNITY	04/02/2023	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$160.00	2023-2023	Loss
2023305083	INDEMNITY	01/02/2020	LINWOOD CITY	M-PHYSICIAN FEES	\$630.00	2020-2020	Loss
2023306945	INDEMNITY	05/31/2023	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$220.00	2023-2023	Loss
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$320.00	2023-2023	Loss
2024324464	MEDICAL ONLY	01/22/2024	WILDWOOD CITY	M-PHYSICIAN FEES	\$80.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,050.00</b>		
<b>Check Number: 45473    Check Date: 03/12/2024    Payee Name: FERNANDO J. DELASOTTA MD</b>							
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	M-ORTHO/NEURO FEES	\$115.00	2022-2022	Loss
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-ORTHO/NEURO FEES	\$115.00	2023-2023	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
					<b>Check Amount:</b>	<b>\$230.00</b>	
<b>Check Number: 45474    Check Date: 03/12/2024    Payee Name: ONE CALL CARE DIAGNOSTICS</b>							
2024324531	INDEMNITY	01/18/2024	LOWER TOWNSHIP	M-MRI	\$485.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$485.00</b>	
<b>Check Number: 45475    Check Date: 03/12/2024    Payee Name: CAPE RADIOLOGY</b>							
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	M-DIAGNOSTICS	\$43.19	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$43.19</b>	
<b>Check Number: 45476    Check Date: 03/12/2024    Payee Name: ATLANTICARE SURGERY CENTER EHT</b>							
2024309201	INDEMNITY	07/14/2023	VENTNOR CITY	M-AMBULATORY SURGERY CENTER	\$2,064.76	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$2,064.76</b>	
<b>Check Number: 45477    Check Date: 03/12/2024    Payee Name: CENTENNIAL SURGERY CENTER LLC</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-AMBULATORY SURGERY CENTER	\$3,437.25	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$3,437.25</b>	
<b>Check Number: 45478    Check Date: 03/12/2024    Payee Name: SOUTH JERSEY HS EMG PHYS SV, PA</b>							
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$978.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$978.00</b>	
<b>Check Number: 45479    Check Date: 03/12/2024    Payee Name: ROTHMAN ORTHOPAEDICS</b>							
2021237391	INDEMNITY	05/11/2021	GALLOWAY TOWNSHIP	M-ORTHO/NEURO FEES	\$114.84	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$114.84</b>	
<b>Check Number: 45480    Check Date: 03/12/2024    Payee Name: NovaCare Rehabilitation</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2022-2022	Loss
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2023-2023	Loss
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2024-2024	Loss
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$100.94	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$1,009.40</b>	
<b>Check Number: 45481    Check Date: 03/12/2024    Payee Name: ATLANTIC RADIOLOGISTS PROFESSIONAL ASSOCIATION, LLC</b>							
2024324464	MEDICAL ONLY	01/22/2024	WILDWOOD CITY	M-PHYSICIAN FEES	\$75.22	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$75.22</b>	
<b>Check Number: 45482    Check Date: 03/12/2024    Payee Name: CAPE REGIONAL URGENT CARE</b>							



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024324464	MEDICAL ONLY	01/22/2024	WILDWOOD CITY	M-URGENT CARE CENTER	\$314.83	2024-2024	Loss
2024324531	INDEMNITY	01/18/2024	LOWER TOWNSHIP	M-URGENT CARE CENTER	\$321.54	2024-2024	Loss
2024324661	MEDICAL ONLY	01/19/2024	UPPER TOWNSHIP	M-URGENT CARE CENTER	\$183.10	2024-2024	Loss
2024324683	INDEMNITY	01/23/2024	UPPER TOWNSHIP	M-URGENT CARE CENTER	\$183.10	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,002.57</b>		
<b>Check Number: 45483    Check Date: 03/12/2024    Payee Name: PREMIER ORTHOPAEDIC &amp; SPORTS MEDICINE ASSOCIATES OF SNJ LLC</b>							
2024315985	INDEMNITY	10/05/2023	MILLVILLE CITY	M-ORTHO/NEURO FEES	\$61.66	2023-2023	Loss
2024319788	MEDICAL ONLY	11/17/2023	VENTNOR CITY	M-OCCUPATIONAL MEDICINE	\$244.18	2023-2023	Loss
2024325158	INDEMNITY	01/26/2024	MILLVILLE CITY	M-OCCUPATIONAL MEDICINE	\$88.09	2024-2024	Loss
2024326750	MEDICAL ONLY	02/13/2024	MILLVILLE CITY	M-OCCUPATIONAL MEDICINE	\$132.13	2024-2024	Loss
<b>Check Amount:</b>					<b>\$526.06</b>		
<b>Check Number: 45484    Check Date: 03/12/2024    Payee Name: CAPE PHYSICAL THERAPY LLC</b>							
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$108.00	2022-2022	Loss
2023307686	INDEMNITY	06/23/2023	SEA ISLE CITY	M-PHYSICIAN FEES	\$120.00	2023-2023	Loss
2024312757	INDEMNITY	09/05/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$120.00	2023-2023	Loss
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	M-PHYSICIAN FEES	\$108.00	2023-2023	Loss
2024321646	MEDICAL ONLY	12/12/2023	LOWER TOWNSHIP	M-PHYSICIAN FEES	\$240.00	2023-2023	Loss
2024323497	MEDICAL ONLY	01/10/2024	DENNIS TOWNSHIP	M-PHYSICIAN FEES	\$90.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$786.00</b>		
<b>Check Number: 45485    Check Date: 03/12/2024    Payee Name: SHREWSBURY AMBULATORY ANESTHESIA LLC</b>							
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$1,500.00	2023-2023	Loss
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$2,400.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$3,900.00</b>		
<b>Check Number: 45486    Check Date: 03/12/2024    Payee Name: BAYFRONT EMERGENCY PHYSICIANS, PA</b>							
2024322063	INDEMNITY	12/18/2023	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$577.00	2023-2023	Loss
2024324914	MEDICAL ONLY	01/25/2024	SOMERS POINT CITY	M-PHYSICIAN FEES	\$536.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,113.00</b>		
<b>Check Number: 45487    Check Date: 03/12/2024    Payee Name: ALIGN DIRECT BILL LLC</b>							
2024311634	MEDICAL ONLY	08/18/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$95.00	2023-2023	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Amount:</b>					<b>\$95.00</b>		
<b>Check Number: 45488    Check Date: 03/12/2024    Payee Name: SPECTRUM FITNESS LLC</b>							
2023290740	INDEMNITY	12/08/2022	VENTNOR CITY	M-PHYSICIAN FEES	\$1,097.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,097.00</b>		
<b>Check Number: 45489    Check Date: 03/12/2024    Payee Name: myMATRIX</b>							
2024309201	INDEMNITY	07/14/2023	VENTNOR CITY	M-PHARMACY	\$9.39	2023-2023	Loss
2024323671	INDEMNITY	01/10/2024	SEA ISLE CITY	M-PHARMACY	\$19.19	2024-2024	Loss
<b>Check Amount:</b>					<b>\$28.58</b>		
<b>Check Number: 45490    Check Date: 03/12/2024    Payee Name: ORTHONJ, LLC</b>							
2020206029	INDEMNITY	05/24/2020	VENTNOR CITY	M-ORTHO/NEURO FEES	\$125.59	2020-2020	Loss
2021211338	INDEMNITY	08/04/2020	EGG HARBOR TOWNSHIP	M-ORTHO/NEURO FEES	\$530.15	2020-2020	Loss
2024319133	INDEMNITY	10/27/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$85.32	2023-2023	Loss
2024323671	INDEMNITY	01/10/2024	SEA ISLE CITY	M-ORTHO/NEURO FEES	\$244.83	2024-2024	Loss
2024324457	INDEMNITY	01/20/2024	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$144.10	2024-2024	Loss
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	M-ORTHO/NEURO FEES	\$239.32	2024-2024	Loss
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$391.77	2024-2024	Loss
2024327911	MEDICAL ONLY	02/27/2024	GALLOWAY TOWNSHIP	M-PHYSICIAN FEES	\$288.92	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,050.00</b>		
<b>Check Number: 45491    Check Date: 03/12/2024    Payee Name: ATLANTICARE CENTER FOR ORTHOPEDIC SURGERY</b>							
2021237391	INDEMNITY	05/11/2021	GALLOWAY TOWNSHIP	M-AMBULATORY SURGERY CENTER	\$398.60	2021-2021	Loss
<b>Check Amount:</b>					<b>\$398.60</b>		
<b>Check Number: 45492    Check Date: 03/12/2024    Payee Name: STRIVE PHYSICAL THERAPY SPECIALISTS LLC</b>							
2021236152	INDEMNITY	04/27/2021	VENTNOR CITY	M-PHYSICIAN FEES	\$90.00	2021-2021	Loss
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024315688	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024319133	INDEMNITY	10/27/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024320831	MEDICAL ONLY	12/02/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024322903	MEDICAL ONLY	01/03/2024	VENTNOR CITY	M-PHYSICIAN FEES	\$270.00	2024-2024	Loss
2024324457	INDEMNITY	01/20/2024	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$90.00	2024-2024	Loss
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	M-PHYSICIAN FEES	\$180.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,070.00</b>		
<b>Check Number: 45493    Check Date: 03/12/2024    Payee Name: ORTHONJ, LLC</b>							
2023300629	INDEMNITY	04/02/2023	EGG HARBOR TOWNSHIP	M-ORTHO/NEURO FEES	\$121.97	2023-2023	Loss
2024310217	MEDICAL ONLY	07/29/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$480.47	2023-2023	Loss
2024319262	INDEMNITY	11/09/2023	LOWER TOWNSHIP	M-ORTHO/NEURO FEES	\$121.97	2023-2023	Loss
2024323003	INDEMNITY	01/02/2024	OCEAN CITY	M-ORTHO/NEURO FEES	\$121.97	2024-2024	Loss
<b>Check Amount:</b>					<b>\$846.38</b>		
<b>Check Number: 45494    Check Date: 03/12/2024    Payee Name: SOUTH JERSEY REHAB &amp; SPINE INC</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$232.03	2020-2020	Loss
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-PHYSICIAN FEES	\$144.35	2023-2023	Loss
2023306945	INDEMNITY	05/31/2023	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$144.35	2023-2023	Loss
2024309201	INDEMNITY	07/14/2023	VENTNOR CITY	M-PHYSICIAN FEES	\$2,975.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$3,495.73</b>		
<b>Check Number: 45495    Check Date: 03/12/2024    Payee Name: HOWARD HAMMER PSYD LLC</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	M-BEHAVIORAL HEALTH	\$145.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$145.00</b>		
<b>Check Number: 45496    Check Date: 03/12/2024    Payee Name: OSPREY REHABILITATION LLC</b>							
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$302.82	2023-2023	Loss
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-PHYSICIAN FEES	\$100.94	2024-2024	Loss
2024324099	INDEMNITY	01/16/2024	WILDWOOD CREST BOROUGH	M-PHYSICIAN FEES	\$201.88	2024-2024	Loss
<b>Check Amount:</b>					<b>\$605.64</b>		
<b>Check Number: 45497    Check Date: 03/12/2024    Payee Name: QUALCARE INC</b>							
2024320309	MEDICAL ONLY	11/27/2023	PLEASANTVILLE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$555.00	2023-2023	Loss
2024328173	MEDICAL ONLY	02/28/2024	MILLVILLE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024328378	MEDICAL ONLY	03/03/2024	WILDWOOD CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024328614	MEDICAL ONLY	02/20/2024	STONE HARBOR BOROUGH	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024328655	INDEMNITY	03/05/2024	VENTNOR CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024328759	INDEMNITY	03/06/2024	MIDDLE TOWNSHIP	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024328820	MEDICAL ONLY	03/07/2024	WILDWOOD CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$3,945.00</b>		
<b>Check Number: 45498    Check Date: 03/19/2024    Payee Name: GEMMEL TODD &amp; MERENICH PA</b>							
2022243758	BODILY INJURY	05/28/2021	LOWER TOWNSHIP	L-LEGAL GL	\$3,281.00	2021-2021	Legal
2022244448	BODILY INJURY	08/02/2021	WILDWOOD CREST BOROUGH	L-LEGAL AL	\$3,507.00	2021-2021	Legal
2023300282	BODILY INJURY	11/08/2021	LINWOOD CITY	L-LEGAL GL	\$3,791.00	2021-2021	Legal
<b>Check Amount:</b>					<b>\$10,579.00</b>		
<b>Check Number: 45499    Check Date: 03/19/2024    Payee Name: STATE SHORTHAND REPORTING SERVICE</b>							
2021221162	INDEMNITY	11/06/2020	MARGATE CITY	E-MISC LEGAL EXPENSE WC	\$208.00	2020-2020	Expense
<b>Check Amount:</b>					<b>\$208.00</b>		
<b>Check Number: 45500    Check Date: 03/19/2024    Payee Name: MRO CORPORATION</b>							
2024319131	MEDICAL ONLY	10/20/2023	DENNIS TOWNSHIP	E-MISC ALL OTHER WC	\$317.00	2023-2023	Expense
<b>Check Amount:</b>					<b>\$317.00</b>		
<b>Check Number: 45501    Check Date: 03/19/2024    Payee Name: ROBERT F DAVIS</b>							
2024329195	COMPREHENSIVE	03/11/2024	WEST WILDWOOD BOROUGH	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$3,815.40	2024-2024	Loss
<b>Check Amount:</b>					<b>\$3,815.40</b>		
<b>Check Number: 45502    Check Date: 03/19/2024    Payee Name: SOUTH JERSEY PHYSICIAN ASSOCS</b>							
2023297803	INDEMNITY	03/02/2023	NORTHFIELD CITY	E-ALLOCATED MED EXAM WC	\$800.00	2023-2023	Expense
<b>Check Amount:</b>					<b>\$800.00</b>		
<b>Check Number: 45503    Check Date: 03/19/2024    Payee Name: FERNANDO J. DELASOTTA MD</b>							
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	M-IND MED EXAMS WC	\$150.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$150.00</b>		
<b>Check Number: 45504    Check Date: 03/19/2024    Payee Name: I C U INVESTIGATIONS INC</b>							
2024325340	INDEMNITY	01/22/2024	WILDWOOD CITY	E-INDEP ADJUSTOR WC	\$475.00	2024-2024	Expense
<b>Check Amount:</b>					<b>\$475.00</b>		
<b>Check Number: 45505    Check Date: 03/19/2024    Payee Name: BIRCHMEIER &amp; POWELL LLC</b>							
2021212710	BODILY INJURY	05/23/2020	WATERFORD TOWNSHIP	L-LEGAL GL	\$11,885.22	2020-2020	Legal





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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2022244884	BODILY INJURY	07/11/2021	VENTNOR CITY	L-LEGAL GL	\$2,159.00	2021-2021	Legal
<b>Check Amount:</b>					<b>\$14,044.22</b>		
<b>Check Number: 45506    Check Date: 03/19/2024    Payee Name: ATLANTIC SECURITY INT'L</b>							
2024310137	INDEMNITY	07/28/2023	VENTNOR CITY	E-SUBROGATION EXPENSE WC	\$151.50	2023-2023	Expense
<b>Check Amount:</b>					<b>\$151.50</b>		
<b>Check Number: 45507    Check Date: 03/19/2024    Payee Name: LEO S PETETTI LLC</b>							
2024326172	1ST PARTY COLL PD	02/04/2024	HAMILTON TOWNSHIP	E-APPRAISERS PR	\$270.00	2024-2024	Expense
<b>Check Amount:</b>					<b>\$270.00</b>		
<b>Check Number: 45508    Check Date: 03/19/2024    Payee Name: DAVID S DEWEESE</b>							
2024328203	EPL PI	10/08/2023	UPPER DEERFIELD TOWNSHIP	L-LEGAL GL	\$750.00	2023-2023	Legal
<b>Check Amount:</b>					<b>\$750.00</b>		
<b>Check Number: 45509    Check Date: 03/19/2024    Payee Name: CLIFF GRAY APPRAISAL SERVICE</b>							
2024319288	3RD PARTY PD	11/06/2023	OCEAN CITY	E-INDEP ADJUSTOR AL	\$110.00	2023-2023	Expense
<b>Check Amount:</b>					<b>\$110.00</b>		
<b>Check Number: 45510    Check Date: 03/19/2024    Payee Name: THE DEWEESE LAW FIRM</b>							
2018141995	1ST PARTY COLL PD	05/02/2018	MILLVILLE CITY	L-LEGAL PR	\$3,330.00	2018-2018	Legal
2021216734	COMPREHENSIVE	10/05/2020	GALLOWAY TOWNSHIP	L-LEGAL PR	\$380.00	2020-2020	Legal
2022262367	1ST PARTY COLL PD	01/25/2022	MIDDLE TOWNSHIP	L-LEGAL PR	\$315.00	2022-2022	Legal
2023282417	1ST PARTY COLL PD	09/06/2022	PLEASANTVILLE CITY	L-LEGAL PR	\$343.55	2022-2022	Legal
2023283484	MEDICAL ONLY	09/19/2022	VENTNOR CITY	E-SUBROGATION EXPENSE WC	\$167.06	2022-2022	Expense
<b>Check Amount:</b>					<b>\$4,535.61</b>		
<b>Check Number: 45511    Check Date: 03/19/2024    Payee Name: AFFANATO MARUT LLC</b>							
2021224547	INDEMNITY	12/24/2020	PLEASANTVILLE CITY	L-LEGAL WC	\$115.00	2020-2020	Legal
2023277463	INDEMNITY	07/04/2022	HAMILTON TOWNSHIP	L-LEGAL WC	\$210.00	2022-2022	Legal
2023287496	INDEMNITY	10/28/2022	HAMILTON TOWNSHIP	L-LEGAL WC	\$154.00	2022-2022	Legal
<b>Check Amount:</b>					<b>\$479.00</b>		
<b>Check Number: 45512    Check Date: 03/19/2024    Payee Name: JOEBOY INC T/A ACTION AUTO BODY</b>							
2024325810	COMPREHENSIVE	01/31/2024	GALLOWAY TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$2,873.49	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,873.49</b>		





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45513    Check Date: 03/19/2024    Payee Name: EDDIES AUTO BODY INC</b>							
2024329084	1ST PARTY COLL PD	03/09/2024	MIDDLE TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$641.79	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$641.79</b>	
<b>Check Number: 45514    Check Date: 03/19/2024    Payee Name: MILLVILLE CITY</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$1,815.68	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$1,815.68</b>	
<b>Check Number: 45515    Check Date: 03/19/2024    Payee Name: BRIGANTINE CITY</b>							
2024315688	INDEMNITY	10/04/2023	BRIGANTINE CITY	I-TEMPORARY TOTAL DISABILITY	\$1,429.38	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,429.38</b>	
<b>Check Number: 45516    Check Date: 03/19/2024    Payee Name: OCEAN CITY</b>							
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	I-TEMPORARY TOTAL DISABILITY	\$1,720.42	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$1,720.42</b>	
<b>Check Number: 45517    Check Date: 03/19/2024    Payee Name: OCEAN CITY</b>							
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	I-TEMPORARY TOTAL DISABILITY	\$1,720.42	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$1,720.42</b>	
<b>Check Number: 45518    Check Date: 03/19/2024    Payee Name: PLEASANTVILLE CITY</b>							
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,262.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$2,262.00</b>	
<b>Check Number: 45519    Check Date: 03/19/2024    Payee Name: HAMILTON TOWNSHIP</b>							
2023294910	INDEMNITY	01/29/2023	HAMILTON TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$2,198.00</b>	
<b>Check Number: 45520    Check Date: 03/19/2024    Payee Name: HAMILTON TOWNSHIP</b>							
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,637.24	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,637.24</b>	
<b>Check Number: 45521    Check Date: 03/19/2024    Payee Name: PLEASANTVILLE CITY</b>							
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$2,198.00</b>	
<b>Check Number: 45522    Check Date: 03/19/2024    Payee Name: NORTH WILDWOOD CITY</b>							
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	I-TEMPORARY TOTAL DISABILITY	\$1,336.98	2024-2024	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Amount:</b>					<b>\$1,336.98</b>		
<b>Check Number: 45523    Check Date: 03/19/2024    Payee Name: NORTH WILDWOOD CITY</b>							
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	I-TEMPORARY TOTAL DISABILITY	\$1,336.98	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,336.98</b>		
<b>Check Number: 45524    Check Date: 03/19/2024    Payee Name: NORTH WILDWOOD CITY</b>							
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	I-TEMPORARY TOTAL DISABILITY	\$1,336.98	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,336.98</b>		
<b>Check Number: 45525    Check Date: 03/19/2024    Payee Name: NORTH WILDWOOD CITY</b>							
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	I-TEMPORARY TOTAL DISABILITY	\$1,336.98	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,336.98</b>		
<b>Check Number: 45526    Check Date: 03/19/2024    Payee Name: VENTNOR CITY</b>							
2024328655	INDEMNITY	03/05/2024	VENTNOR CITY	I-TEMPORARY TOTAL DISABILITY	\$1,292.57	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,292.57</b>		
<b>Check Number: 45527    Check Date: 03/19/2024    Payee Name: NEW JERSEY IME ASSOCIATES LLC</b>							
2023299476	INDEMNITY	03/21/2023	EGG HARBOR TOWNSHIP	E-ALLOCATED MED EXAM WC	\$1,000.00	2023-2023	Expense
<b>Check Amount:</b>					<b>\$1,000.00</b>		
<b>Check Number: 45528    Check Date: 03/19/2024    Payee Name: Michael Galante</b>							
2024318096	3RD PARTY PD	10/26/2023	LOWER TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) AL PD	\$755.02	2023-2023	Loss
<b>Check Amount:</b>					<b>\$755.02</b>		
<b>Check Number: 45529    Check Date: 03/19/2024    Payee Name: Eric Munyon</b>							
2021237391	INDEMNITY	05/11/2021	GALLOWAY TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,480.52	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,480.52</b>		
<b>Check Number: 45530    Check Date: 03/19/2024    Payee Name: William Ferris</b>							
2023286210	INDEMNITY	10/15/2022	BRIGANTINE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,253.76	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,253.76</b>		
<b>Check Number: 45531    Check Date: 03/19/2024    Payee Name: Gerhard Thoresen III</b>							
2022273096	INDEMNITY	05/13/2022	HAMILTON TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$106.50	2022-2022	Loss
<b>Check Amount:</b>					<b>\$106.50</b>		
<b>Check Number: 45532    Check Date: 03/19/2024    Payee Name: Kevin Livingston</b>							



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2021234875	INDEMNITY	04/09/2021	MILLVILLE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,140.64	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,140.64</b>		
<b>Check Number: 45533    Check Date: 03/19/2024    Payee Name: Craig Dennis</b>							
2023282124	INDEMNITY	09/06/2022	PLEASANTVILLE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,198.40	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,198.40</b>		
<b>Check Number: 45534    Check Date: 03/19/2024    Payee Name: Mario Fuscia</b>							
2021217221	INDEMNITY	10/13/2020	VENTNOR CITY	I-PERMANENT PARTIAL DISABILITY	\$1,764.00	2020-2020	Loss
<b>Check Amount:</b>					<b>\$1,764.00</b>		
<b>Check Number: 45535    Check Date: 03/19/2024    Payee Name: Michael Palmentieri</b>							
2021236577	INDEMNITY	04/25/2021	EGG HARBOR TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$2,068.00	2021-2021	Loss
<b>Check Amount:</b>					<b>\$2,068.00</b>		
<b>Check Number: 45536    Check Date: 03/19/2024    Payee Name: Ryan Clark</b>							
2022261128	INDEMNITY	01/13/2022	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$1,220.40	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,220.40</b>		
<b>Check Number: 45537    Check Date: 03/19/2024    Payee Name: Matthew Gorham</b>							
2023277910	INDEMNITY	07/11/2022	VENTNOR CITY	I-PERMANENT PARTIAL DISABILITY	\$1,136.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,136.00</b>		
<b>Check Number: 45538    Check Date: 03/19/2024    Payee Name: Owen Mastrocola</b>							
2021236549	INDEMNITY	04/30/2021	PLEASANTVILLE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,497.28	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,497.28</b>		
<b>Check Number: 45539    Check Date: 03/19/2024    Payee Name: HAMILTON TOWNSHIP</b>							
2024326172	1ST PARTY COLL PD	02/04/2024	HAMILTON TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$2,928.90	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,928.90</b>		
<b>Check Number: 45540    Check Date: 03/19/2024    Payee Name: EGG HARBOR TOWNSHIP</b>							
2022277203	1ST PARTY COLL PD	06/26/2022	EGG HARBOR TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$1,000.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,000.00</b>		
<b>Check Number: 45541    Check Date: 03/19/2024    Payee Name: IVYREHAB NETWORK INC</b>							
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$489.00	2022-2022	Loss
2024318880	INDEMNITY	11/03/2023	OCEAN CITY	M-PHYSICIAN FEES	\$175.00	2023-2023	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	M-PHYSICIAN FEES	\$170.00	2024-2024	Loss
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	M-PHYSICIAN FEES	\$319.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,153.00</b>		
<b>Check Number: 45542    Check Date: 03/19/2024    Payee Name: ADVANCED ENT &amp; ALLERGY</b>							
2024324683	INDEMNITY	01/23/2024	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$227.66	2024-2024	Loss
<b>Check Amount:</b>					<b>\$227.66</b>		
<b>Check Number: 45543    Check Date: 03/19/2024    Payee Name: COOPER SURGICAL ASSOCIATES PA</b>							
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	M-PHYSICIAN FEES	\$334.75	2023-2023	Loss
<b>Check Amount:</b>					<b>\$334.75</b>		
<b>Check Number: 45544    Check Date: 03/19/2024    Payee Name: TWIN BORO PHYSICAL THERAPY ASSOCIATES PA</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$240.00	2020-2020	Loss
2021238363	INDEMNITY	05/24/2021	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$320.00	2021-2021	Loss
2023294910	INDEMNITY	01/29/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$160.00	2023-2023	Loss
2023300609	INDEMNITY	04/02/2023	WATERFORD TOWNSHIP	M-PHYSICIAN FEES	\$110.00	2023-2023	Loss
2023300629	INDEMNITY	04/02/2023	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$240.00	2023-2023	Loss
2023305083	INDEMNITY	01/02/2020	LINWOOD CITY	M-PHYSICIAN FEES	\$110.00	2020-2020	Loss
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$160.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,340.00</b>		
<b>Check Number: 45545    Check Date: 03/19/2024    Payee Name: ONE CALL CARE DIAGNOSTICS</b>							
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-MRI	\$1,075.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,075.00</b>		
<b>Check Number: 45546    Check Date: 03/19/2024    Payee Name: MATTHEW J PITERA MD PA</b>							
2023301475	INDEMNITY	04/11/2023	GALLOWAY TOWNSHIP	M-BEHAVIORAL HEALTH	\$1,250.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,250.00</b>		
<b>Check Number: 45547    Check Date: 03/19/2024    Payee Name: ATLANTICARE SURGERY CENTER EHT</b>							
2021226252	INDEMNITY	01/14/2021	EGG HARBOR TOWNSHIP	M-AMBULATORY SURGERY CENTER	\$925.31	2021-2021	Loss
<b>Check Amount:</b>					<b>\$925.31</b>		
<b>Check Number: 45548    Check Date: 03/19/2024    Payee Name: EAR NOSE AND THROAT SPECIALISTS PC</b>							
2024324683	INDEMNITY	01/23/2024	UPPER TOWNSHIP	M-OTHER PROVIDER FEES	\$295.85	2024-2024	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Amount:</b>					<b>\$295.85</b>		
<b>Check Number: 45549    Check Date: 03/19/2024    Payee Name: NovaCare Rehabilitation</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$201.88	2022-2022	Loss
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2023-2023	Loss
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2024-2024	Loss
<b>Check Amount:</b>					<b>\$807.52</b>		
<b>Check Number: 45550    Check Date: 03/19/2024    Payee Name: ATLANTIC RADIOLOGISTS PROFESSIONAL ASSOCIATION, LLC</b>							
2024326243	MEDICAL ONLY	02/07/2024	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$15.57	2024-2024	Loss
<b>Check Amount:</b>					<b>\$15.57</b>		
<b>Check Number: 45551    Check Date: 03/19/2024    Payee Name: CAPE REGIONAL URGENT CARE</b>							
2022246522	INDEMNITY	08/28/2021	MIDDLE TOWNSHIP	M-URGENT CARE CENTER	\$79.48	2021-2021	Loss
2023307987	MEDICAL ONLY	06/28/2023	AVALON BOROUGH	M-URGENT CARE CENTER	\$136.79	2023-2023	Loss
2024319955	MEDICAL ONLY	11/20/2023	CAPE MAY CITY	M-URGENT CARE CENTER	\$156.30	2023-2023	Loss
2024323253	MEDICAL ONLY	01/05/2024	OCEAN CITY	M-URGENT CARE CENTER	\$119.56	2024-2024	Loss
2024324099	INDEMNITY	01/16/2024	WILDWOOD CREST BOROUGH	M-URGENT CARE CENTER	\$183.10	2024-2024	Loss
2024325050	MEDICAL ONLY	01/25/2024	OCEAN CITY	M-PHYSICIAN FEES	\$219.11	2024-2024	Loss
2024325155	MEDICAL ONLY	01/22/2024	CAPE MAY CITY	M-PHYSICIAN FEES	\$230.85	2024-2024	Loss
2024325255	MEDICAL ONLY	01/29/2024	WILDWOOD CITY	M-PHYSICIAN FEES	\$183.10	2024-2024	Loss
2024325411	MEDICAL ONLY	01/30/2024	CAPE MAY CITY	M-URGENT CARE CENTER	\$119.36	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,427.65</b>		
<b>Check Number: 45552    Check Date: 03/19/2024    Payee Name: PREMIER ORTHOPAEDIC &amp; SPORTS MEDICINE ASSOCIATES OF SNJ LLC</b>							
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$88.09	2023-2023	Loss
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-ORTHO/NEURO FEES	\$44.03	2024-2024	Loss
<b>Check Amount:</b>					<b>\$132.12</b>		
<b>Check Number: 45553    Check Date: 03/19/2024    Payee Name: CAPE PHYSICAL THERAPY LLC</b>							
2024312757	INDEMNITY	09/05/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$120.00	2023-2023	Loss
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024321646	MEDICAL ONLY	12/12/2023	LOWER TOWNSHIP	M-PHYSICIAN FEES	\$168.00	2023-2023	Loss
2024323497	MEDICAL ONLY	01/10/2024	DENNIS TOWNSHIP	M-PHYSICIAN FEES	\$60.00	2024-2024	Loss



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Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
					<b>Check Amount:</b>	<b>\$528.00</b>	
<b>Check Number: 45554    Check Date: 03/19/2024    Payee Name: MSC GROUP INC</b>							
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-DME/PROSTHETICS	\$831.50	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$831.50</b>	
<b>Check Number: 45555    Check Date: 03/19/2024    Payee Name: ATLANTICARE PHYSICIAN GROUP P A</b>							
2024326421	MEDICAL ONLY	02/08/2024	MARGATE CITY	M-OCCUPATIONAL MEDICINE	\$149.25	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$149.25</b>	
<b>Check Number: 45556    Check Date: 03/19/2024    Payee Name: PREMIER ORTHO ASSOCSURG</b>							
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	M-AMBULATORY SURGERY CENTER	\$15,693.02	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$15,693.02</b>	
<b>Check Number: 45557    Check Date: 03/19/2024    Payee Name: ATLANTICARE REGIONAL MEDICAL CENTER</b>							
2024324191	MEDICAL ONLY	12/02/2023	LONGPORT BOROUGH	M-ACUTE CARE HOSPITAL	\$2,511.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$2,511.00</b>	
<b>Check Number: 45558    Check Date: 03/19/2024    Payee Name: HOME CARE CONNECT LLC</b>							
2023306945	INDEMNITY	05/31/2023	EGG HARBOR TOWNSHIP	M-DME/PROSTHETICS	\$98.32	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$98.32</b>	
<b>Check Number: 45559    Check Date: 03/19/2024    Payee Name: ORTHONJ, LLC</b>							
2020206029	INDEMNITY	05/24/2020	VENTNOR CITY	M-ORTHO/NEURO FEES	\$427.02	2020-2020	Loss
2022253534	INDEMNITY	10/29/2021	EGG HARBOR TOWNSHIP	M-ORTHO/NEURO FEES	\$287.70	2021-2021	Loss
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	M-ORTHO/NEURO FEES	\$51.82	2022-2022	Loss
2024310762	INDEMNITY	08/04/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$125.59	2023-2023	Loss
2024312936	INDEMNITY	09/07/2023	BRIGANTINE CITY	M-ORTHO/NEURO FEES	\$85.32	2023-2023	Loss
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$883.12	2023-2023	Loss
2024320831	MEDICAL ONLY	12/02/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$85.32	2023-2023	Loss
2024322063	INDEMNITY	12/18/2023	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$64.26	2023-2023	Loss
2024323497	MEDICAL ONLY	01/10/2024	DENNIS TOWNSHIP	M-ORTHO/NEURO FEES	\$125.59	2024-2024	Loss
2024327911	MEDICAL ONLY	02/27/2024	GALLOWAY TOWNSHIP	M-PHYSICIAN FEES	\$85.32	2024-2024	Loss
2024328083	MEDICAL ONLY	02/28/2024	SEA ISLE CITY	M-ORTHO/NEURO FEES	\$316.38	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$2,537.44</b>	



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45560      Check Date: 03/19/2024      Payee Name: STRIVE PHYSICAL THERAPY SPECIALISTS LLC</b>							
2021236152	INDEMNITY	04/27/2021	VENTNOR CITY	M-PHYSICIAN FEES	\$360.00	2021-2021	Loss
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024312936	INDEMNITY	09/07/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024315688	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$360.00	2023-2023	Loss
2024319133	INDEMNITY	10/27/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024322176	INDEMNITY	12/19/2023	OCEAN CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024322903	MEDICAL ONLY	01/03/2024	VENTNOR CITY	M-PHYSICIAN FEES	\$270.00	2024-2024	Loss
2024324457	INDEMNITY	01/20/2024	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$270.00	2024-2024	Loss
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	M-PHYSICIAN FEES	\$360.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,610.00</b>		
<b>Check Number: 45561      Check Date: 03/19/2024      Payee Name: ORTHONJ, LLC</b>							
2024312757	INDEMNITY	09/05/2023	STONE HARBOR BOROUGH	M-ORTHO/NEURO FEES	\$121.97	2023-2023	Loss
2024323799	MEDICAL ONLY	01/11/2024	OCEAN CITY	M-ORTHO/NEURO FEES	\$233.31	2024-2024	Loss
2024328759	INDEMNITY	03/06/2024	MIDDLE TOWNSHIP	M-ORTHO/NEURO FEES	\$338.35	2024-2024	Loss
<b>Check Amount:</b>					<b>\$693.63</b>		
<b>Check Number: 45562      Check Date: 03/19/2024      Payee Name: SOUTH JERSEY REHAB &amp; SPINE INC</b>							
2021226252	INDEMNITY	01/14/2021	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$1,300.00	2021-2021	Loss
<b>Check Amount:</b>					<b>\$1,300.00</b>		
<b>Check Number: 45563      Check Date: 03/19/2024      Payee Name: RADCLIFF SPINE CARE</b>							
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-ORTHO/NEURO FEES	\$265.39	2022-2022	Loss
<b>Check Amount:</b>					<b>\$265.39</b>		
<b>Check Number: 45564      Check Date: 03/19/2024      Payee Name: OD FAMILY MEDICINE LLC</b>							
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	M-OCCUPATIONAL MEDICINE	\$91.93	2024-2024	Loss
<b>Check Amount:</b>					<b>\$91.93</b>		
<b>Check Number: 45565      Check Date: 03/19/2024      Payee Name: OSPREY REHABILITATION LLC</b>							
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$100.94	2022-2022	Loss





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$403.76	2023-2023	Loss
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-PHYSICIAN FEES	\$201.88	2024-2024	Loss
2024324099	INDEMNITY	01/16/2024	WILDWOOD CREST BOROUGH	M-PHYSICIAN FEES	\$201.88	2024-2024	Loss
<b>Check Amount:</b>					<b>\$908.46</b>		

<b>Check Number: 45566</b>	<b>Check Date: 03/19/2024</b>	<b>Payee Name: QUALCARE INC</b>
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2024328957	MEDICAL ONLY	02/28/2024	MILLVILLE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024328989	MEDICAL ONLY	03/08/2024	HAMILTON TOWNSHIP	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329039	MEDICAL ONLY	03/08/2024	OCEAN CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329072	MEDICAL ONLY	03/08/2024	PLEASANTVILLE CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329107	MEDICAL ONLY	03/11/2024	OCEAN CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329120	MEDICAL ONLY	03/05/2024	SOMERS POINT CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329121	MEDICAL ONLY	03/11/2024	SOMERS POINT CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329129	MEDICAL ONLY	03/11/2024	OCEAN CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329167	MEDICAL ONLY	03/11/2024	WATERFORD TOWNSHIP	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329340	MEDICAL ONLY	03/12/2024	CAPE MAY CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329505	MEDICAL ONLY	03/13/2024	WOODBINE BOROUGH	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$6,215.00</b>		

<b>Check Number: 45567</b>	<b>Check Date: 03/19/2024</b>	<b>Payee Name: QUAL-LYNX</b>
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2021216450	INDEMNITY	10/02/2020	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$3.25	2020-2020	Expense
2021221162	INDEMNITY	11/06/2020	MARGATE CITY	E-MISC ALL OTHER WC	\$22.75	2020-2020	Expense
2021233366	INDEMNITY	03/21/2021	GALLOWAY TOWNSHIP	E-MISC ALL OTHER WC	\$19.50	2021-2021	Expense
<b>Check Amount:</b>					<b>\$45.50</b>		

<b>Check Number: 45568</b>	<b>Check Date: 03/26/2024</b>	<b>Payee Name: GOLDENBERG, MACKLER &amp; SAYEGH, PA</b>
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2023302221	INDEMNITY	04/24/2023	VENTNOR CITY	I-CLAIMANT LEGAL EXP IND	\$2,598.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,598.00</b>		

<b>Check Number: 45569</b>	<b>Check Date: 03/26/2024</b>	<b>Payee Name: GEMMEL TODD &amp; MERENICH PA</b>
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2021211743	BODILY INJURY	07/09/2020	BRIGANTINE CITY	L-LEGAL GL	\$3,621.00	2020-2020	Legal
2021213016	BODILY INJURY	08/18/2020	SEA ISLE CITY	L-LEGAL GL	\$4,500.00	2020-2020	Legal
2021242058	BODILY INJURY	06/29/2021	SEA ISLE CITY	L-LEGAL GL	\$4,000.00	2021-2021	Legal
<b>Check Amount:</b>					<b>\$12,121.00</b>		





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45570    Check Date: 03/26/2024    Payee Name: MADDEN &amp; MADDEN PA</b>							
2021219785	BODILY INJURY	08/13/2020	MARGATE CITY	L-LEGAL GL	\$742.50	2020-2020	Legal
					<b>Check Amount:</b>		<b>\$742.50</b>
<b>Check Number: 45571    Check Date: 03/26/2024    Payee Name: STATE SHORTHAND REPORTING SERVICE</b>							
2023302221	INDEMNITY	04/24/2023	VENTNOR CITY	E-MISC LEGAL EXPENSE WC	\$75.00	2023-2023	Expense
					<b>Check Amount:</b>		<b>\$75.00</b>
<b>Check Number: 45572    Check Date: 03/26/2024    Payee Name: SHORE ORTHOPAEDIC UNIV ASSOC PA</b>							
2022266771	BODILY INJURY	02/26/2022	WILDWOOD CITY	L-LEGAL GL	\$2,500.00	2022-2022	Legal
					<b>Check Amount:</b>		<b>\$2,500.00</b>
<b>Check Number: 45573    Check Date: 03/26/2024    Payee Name: I C U INVESTIGATIONS INC</b>							
2022260883	INDEMNITY	01/07/2022	VENTNOR CITY	E-INDEP ADJUSTOR WC	\$475.00	2022-2022	Expense
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	E-INDEP ADJUSTOR WC	\$1,400.00	2023-2023	Expense
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	E-MISC ALL OTHER WC	\$475.00	2024-2024	Expense
2024328494	INLAND MARINE	07/22/2023	WILDWOOD CITY	E-SUBROGATION EXPENSE PR	\$425.00	2023-2023	Expense
					<b>Check Amount:</b>		<b>\$2,775.00</b>
<b>Check Number: 45574    Check Date: 03/26/2024    Payee Name: BIRCHMEIER &amp; POWELL LLC</b>							
2021240701	POLICE PROF BI	06/05/2021	OCEAN CITY	L-LEGAL GL	\$99.00	2021-2021	Legal
2022243939	BODILY INJURY	06/28/2021	CAPE MAY CITY	L-LEGAL GL	\$391.00	2021-2021	Legal
2023278210	BODILY INJURY	06/23/2022	WILDWOOD CITY	L-LEGAL GL	\$1,207.00	2022-2022	Legal
2023279451	GL PROPERTY DAMAGE	08/15/2020	OCEAN CITY	L-LEGAL GL	\$2,465.00	2020-2020	Legal
					<b>Check Amount:</b>		<b>\$4,162.00</b>
<b>Check Number: 45575    Check Date: 03/26/2024    Payee Name: DJS ASSOCIATES INC</b>							
2021214185	BODILY INJURY	08/28/2020	NORTH WILDWOOD CITY	E-MISC ALL OTHER AL	\$2,900.00	2020-2020	Expense
					<b>Check Amount:</b>		<b>\$2,900.00</b>
<b>Check Number: 45576    Check Date: 03/26/2024    Payee Name: DEFENDER EMERGENCY PRODUCTS SALES &amp; SERVICES LLC</b>							
2024315535	COMPREHENSIVE	09/13/2023	MARGATE CITY	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$1,730.87	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$1,730.87</b>
<b>Check Number: 45577    Check Date: 03/26/2024    Payee Name: ATLANTIC SECURITY INT'L</b>							
2021224070	INDEMNITY	12/17/2020	OCEAN CITY	E-MISC ALL OTHER WC	\$375.00	2020-2020	Expense



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2021238830	INDEMNITY	05/27/2021	WILDWOOD CITY	E-INDEP ADJUSTOR WC	\$303.00	2021-2021	Expense
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	E-MISC ALL OTHER WC	\$375.00	2024-2024	Expense
<b>Check Amount:</b>					<b>\$1,053.00</b>		
<b>Check Number: 45578    Check Date: 03/26/2024    Payee Name: LEO S PETETTI LLC</b>							
2024318088	1ST PARTY COLL PD	10/26/2023	LOWER TOWNSHIP	E-APPRAISERS PR	\$55.00	2023-2023	Expense
<b>Check Amount:</b>					<b>\$55.00</b>		
<b>Check Number: 45579    Check Date: 03/26/2024    Payee Name: DAVID S DEWEESE</b>							
2024319347	PUB OFF PI	08/11/2023	VENTNOR CITY	L-LEGAL GL	\$750.00	2023-2023	Legal
2024319504	PUB OFF BI	08/19/2023	WILDWOOD CITY	L-LEGAL GL	\$750.00	2023-2023	Legal
2024328049	PUB OFF PI	11/01/2022	PLEASANTVILLE CITY	L-LEGAL GL	\$750.00	2022-2022	Legal
<b>Check Amount:</b>					<b>\$2,250.00</b>		
<b>Check Number: 45580    Check Date: 03/26/2024    Payee Name: NEUROSURGICAL &amp; SPINAL SPECIALISTS</b>							
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	M-OTHER PROVIDER FEES	\$2,000.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$2,000.00</b>		
<b>Check Number: 45581    Check Date: 03/26/2024    Payee Name: THE DEWEESE LAW FIRM</b>							
2023282229	INDEMNITY	08/31/2022	WILDWOOD CITY	E-SUBROGATION EXPENSE WC	\$325.00	2022-2022	Expense
2023284867	INDEMNITY	10/01/2022	GALLOWAY TOWNSHIP	E-SUBROGATION EXPENSE WC	\$175.91	2022-2022	Expense
<b>Check Amount:</b>					<b>\$500.91</b>		
<b>Check Number: 45582    Check Date: 03/26/2024    Payee Name: AFFANATO MARUT LLC</b>							
2022258827	INDEMNITY	12/27/2021	MILLVILLE CITY	L-LEGAL WC	\$273.50	2021-2021	Legal
<b>Check Amount:</b>					<b>\$273.50</b>		
<b>Check Number: 45583    Check Date: 03/26/2024    Payee Name: COCKERILL CRAIG &amp; MOORE LLC</b>							
2023287853	GL PROPERTY DAMAGE	11/01/2022	OCEAN CITY	L-LEGAL GL	\$51.00	2022-2022	Legal
<b>Check Amount:</b>					<b>\$51.00</b>		
<b>Check Number: 45584    Check Date: 03/26/2024    Payee Name: HOWARD HAMMER PSY D LLC</b>							
2021225008	INDEMNITY	12/30/2020	SEA ISLE CITY	M-PHYSICIAN FEES	\$165.00	2020-2020	Loss
<b>Check Amount:</b>					<b>\$165.00</b>		
<b>Check Number: 45585    Check Date: 03/26/2024    Payee Name: HOWARD HAMMER PSYD LLC</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$165.00	2022-2022	Loss



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
					<b>Check Amount:</b>	<b>\$165.00</b>	
<b>Check Number: 45586    Check Date: 03/26/2024    Payee Name: ISO SERVICES INC</b>							
2024325933	BODILY INJURY	11/17/2023	GALLOWAY TOWNSHIP	E-MISC ALL OTHER GL	\$13.75	2023-2023	Expense
					<b>Check Amount:</b>	<b>\$13.75</b>	
<b>Check Number: 45587    Check Date: 03/26/2024    Payee Name: PIETRAS SARACINO SMITH &amp; MEEK LLP</b>							
2023302221	INDEMNITY	04/24/2023	VENTNOR CITY	L-LEGAL WC	\$523.00	2023-2023	Legal
					<b>Check Amount:</b>	<b>\$523.00</b>	
<b>Check Number: 45588    Check Date: 03/26/2024    Payee Name: BRIGANTINE CITY</b>							
2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$2,198.00</b>	
<b>Check Number: 45589    Check Date: 03/26/2024    Payee Name: LONGPORT BOROUGH</b>							
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$2,262.00	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$2,262.00</b>	
<b>Check Number: 45590    Check Date: 03/26/2024    Payee Name: MCCAFFREY ADR, LLC</b>							
2022244737	BODILY INJURY	08/05/2021	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER AL	\$2,956.25	2021-2021	Expense
					<b>Check Amount:</b>	<b>\$2,956.25</b>	
<b>Check Number: 45591    Check Date: 03/26/2024    Payee Name: CAPE MAY CITY</b>							
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	I-TEMPORARY TOTAL DISABILITY	\$1,227.08	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$1,227.08</b>	
<b>Check Number: 45592    Check Date: 03/26/2024    Payee Name: LOWER TOWNSHIP</b>							
2024323265	INDEMNITY	01/05/2024	LOWER TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$692.98	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$692.98</b>	
<b>Check Number: 45593    Check Date: 03/26/2024    Payee Name: OCEAN CITY</b>							
2024318880	INDEMNITY	11/03/2023	OCEAN CITY	I-TEMPORARY TOTAL DISABILITY	\$2,198.00	2023-2023	Loss
					<b>Check Amount:</b>	<b>\$2,198.00</b>	
<b>Check Number: 45594    Check Date: 03/26/2024    Payee Name: MILLVILLE CITY</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$2,130.00	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$2,130.00</b>	
<b>Check Number: 45595    Check Date: 03/26/2024    Payee Name: MIDDLE TOWNSHIP</b>							



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024328759	INDEMNITY	03/06/2024	MIDDLE TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,514.02	2024-2024	Loss
					<b>Check Amount:</b>		<b>\$1,514.02</b>
<b>Check Number: 45596    Check Date: 03/26/2024    Payee Name: UPPER TOWNSHIP</b>							
2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	I-TEMPORARY TOTAL DISABILITY	\$1,344.86	2022-2022	Loss
					<b>Check Amount:</b>		<b>\$1,344.86</b>
<b>Check Number: 45597    Check Date: 03/26/2024    Payee Name: MILLVILLE CITY</b>							
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	I-TEMPORARY TOTAL DISABILITY	\$551.84	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$551.84</b>
<b>Check Number: 45598    Check Date: 03/26/2024    Payee Name: STONE HARBOR BOROUGH</b>							
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$1,191.14	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$1,191.14</b>
<b>Check Number: 45599    Check Date: 03/26/2024    Payee Name: AVALON BOROUGH</b>							
2024321659	INDEMNITY	12/12/2023	AVALON BOROUGH	I-TEMPORARY TOTAL DISABILITY	\$586.00	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$586.00</b>
<b>Check Number: 45600    Check Date: 03/26/2024    Payee Name: LAW OFFICES OF THOMAS G SMITH PC</b>							
2021226980	BODILY INJURY	11/10/2020	MARGATE CITY	L-LEGAL GL	\$1,904.00	2020-2020	Legal
					<b>Check Amount:</b>		<b>\$1,904.00</b>
<b>Check Number: 45601    Check Date: 03/26/2024    Payee Name: Dainen Duffin</b>							
2023302221	INDEMNITY	04/24/2023	VENTNOR CITY	I-LUMP SUM SETTLEMENT	\$4,902.00	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$4,902.00</b>
<b>Check Number: 45602    Check Date: 03/26/2024    Payee Name: Anthony Millevoi</b>							
2020207541	INDEMNITY	06/11/2020	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$1,123.00	2020-2020	Loss
					<b>Check Amount:</b>		<b>\$1,123.00</b>
<b>Check Number: 45603    Check Date: 03/26/2024    Payee Name: Michael Costello</b>							
2023305169	INDEMNITY	05/24/2023	WILDWOOD CITY	I-TEMPORARY TOTAL DISABILITY	\$985.54	2023-2023	Loss
					<b>Check Amount:</b>		<b>\$985.54</b>
<b>Check Number: 45604    Check Date: 03/26/2024    Payee Name: Thomas Kresz</b>							
2021215991	INDEMNITY	09/28/2020	MARGATE CITY	I-PERMANENT PARTIAL DISABILITY	\$2,016.00	2020-2020	Loss
					<b>Check Amount:</b>		<b>\$2,016.00</b>



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45605    Check Date: 03/26/2024    Payee Name: Peter Byron</b>							
2021229497	INDEMNITY	02/10/2021	WILDWOOD CITY	I-PERMANENT PARTIAL DISABILITY	\$1,611.04	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$1,611.04</b>	
<b>Check Number: 45606    Check Date: 03/26/2024    Payee Name: Kenneth Pollock</b>							
2021229119	INDEMNITY	01/30/2021	OCEAN CITY	I-PERMANENT PARTIAL DISABILITY	\$2,584.00	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$2,584.00</b>	
<b>Check Number: 45607    Check Date: 03/26/2024    Payee Name: William Lakes</b>							
2022246353	INDEMNITY	08/25/2021	BRIGANTINE CITY	I-PERMANENT PARTIAL DISABILITY	\$1,177.44	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$1,177.44</b>	
<b>Check Number: 45608    Check Date: 03/26/2024    Payee Name: Michael Mabkhouti</b>							
2021219674	INDEMNITY	11/08/2020	PLEASANTVILLE CITY	I-PERMANENT PARTIAL DISABILITY	\$2,268.00	2020-2020	Loss
					<b>Check Amount:</b>	<b>\$2,268.00</b>	
<b>Check Number: 45609    Check Date: 03/26/2024    Payee Name: Robert Shepherd</b>							
2022244124	INDEMNITY	07/23/2021	MIDDLE TOWNSHIP	I-PERMANENT PARTIAL DISABILITY	\$1,808.00	2021-2021	Loss
					<b>Check Amount:</b>	<b>\$1,808.00</b>	
<b>Check Number: 45610    Check Date: 03/26/2024    Payee Name: EGG HARBOR TOWNSHIP</b>							
2023280391	1ST PARTY COLL PD	08/09/2022	EGG HARBOR TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$1,000.00	2022-2022	Loss
					<b>Check Amount:</b>	<b>\$1,000.00</b>	
<b>Check Number: 45611    Check Date: 03/26/2024    Payee Name: HAMILTON TOWNSHIP</b>							
2024324029	1ST PARTY COLL PD	01/10/2024	HAMILTON TOWNSHIP	M-MISC MED(WC) & PD (NON-WC) PR COLL	\$9,495.50	2024-2024	Loss
					<b>Check Amount:</b>	<b>\$9,495.50</b>	
<b>Check Number: 45612    Check Date: 03/26/2024    Payee Name: QUAL-LYNX</b>							
2024314346	MEDICAL ONLY	08/21/2023	MULLICA TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2023-2023	Expense
2024319226	MEDICAL ONLY	11/08/2023	DENNIS TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2023-2023	Expense
2024320203	MEDICAL ONLY	11/23/2023	WATERFORD TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2023-2023	Expense
2024323702	MEDICAL ONLY	01/06/2024	SOMERS POINT CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024323875	MEDICAL ONLY	01/14/2024	OCEAN CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024324099	INDEMNITY	01/16/2024	WILDWOOD CREST BOROUGH	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024324464	MEDICAL ONLY	01/22/2024	WILDWOOD CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024325340	INDEMNITY	01/22/2024	WILDWOOD CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024325411	MEDICAL ONLY	01/30/2024	CAPE MAY CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024325873	MEDICAL ONLY	02/04/2024	GALLOWAY TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024325961	MEDICAL ONLY	02/05/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024325968	MEDICAL ONLY	02/05/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326243	MEDICAL ONLY	02/07/2024	HAMILTON TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326306	MEDICAL ONLY	02/06/2024	CAPE MAY CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326421	MEDICAL ONLY	02/08/2024	MARGATE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326502	MEDICAL ONLY	08/18/2023	WEST WILDWOOD BOROUGH	E-MISC ALL OTHER WC	\$4.25	2023-2023	Expense
2024326524	INDEMNITY	02/09/2024	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326560	MEDICAL ONLY	02/11/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326589	MEDICAL ONLY	02/11/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326631	MEDICAL ONLY	02/10/2024	AVALON BOROUGH	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326676	INDEMNITY	02/12/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326742	MEDICAL ONLY	02/13/2024	WILDWOOD CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326750	MEDICAL ONLY	02/13/2024	MILLVILLE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024326900	MEDICAL ONLY	02/14/2024	CAPE MAY CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024327249	MEDICAL ONLY	02/16/2024	GALLOWAY TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024327870	MEDICAL ONLY	02/26/2024	HAMILTON TOWNSHIP	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024327912	MEDICAL ONLY	02/27/2024	MARGATE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024327988	MEDICAL ONLY	02/27/2024	MARGATE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense
2024328083	MEDICAL ONLY	02/28/2024	SEA ISLE CITY	E-MISC ALL OTHER WC	\$4.25	2024-2024	Expense

**Check Amount: \$144.50**

**Check Number: 45613    Check Date: 03/26/2024    Payee Name: IVYREHAB NETWORK INC**

2022272115	INDEMNITY	04/29/2022	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$404.00	2022-2022	Loss
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Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): **194**



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	M-PHYSICIAN FEES	\$319.00	2024-2024	Loss
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	M-PHYSICIAN FEES	\$170.00	2024-2024	Loss
2024329039	MEDICAL ONLY	03/08/2024	OCEAN CITY	M-PHYSICIAN FEES	\$90.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$983.00</b>		
<b>Check Number: 45614    Check Date: 03/26/2024    Payee Name: ARMC ANESTHESIOLOGISTS</b>							
2024309201	INDEMNITY	07/14/2023	VENTNOR CITY	M-PHYSICIAN FEES	\$784.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$784.00</b>		
<b>Check Number: 45615    Check Date: 03/26/2024    Payee Name: SHORE MEDICAL CENTER</b>							
2024324683	INDEMNITY	01/23/2024	UPPER TOWNSHIP	M-ACUTE CARE HOSPITAL	\$2,106.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,106.00</b>		
<b>Check Number: 45616    Check Date: 03/26/2024    Payee Name: CAPE REGIONAL MEDICAL CENTER</b>							
2024326589	MEDICAL ONLY	02/11/2024	MIDDLE TOWNSHIP	M-ACUTE CARE HOSPITAL	\$1,028.00	2024-2024	Loss
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	M-ACUTE CARE HOSPITAL	\$1,404.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,432.00</b>		
<b>Check Number: 45617    Check Date: 03/26/2024    Payee Name: NEW JERSEY HEALTHCARE SPECIALISTS PC</b>							
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$1,726.40	2022-2022	Loss
<b>Check Amount:</b>					<b>\$1,726.40</b>		
<b>Check Number: 45618    Check Date: 03/26/2024    Payee Name: TWIN BORO PHYSICAL THERAPY ASSOCIATES PA</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$160.00	2020-2020	Loss
2021238363	INDEMNITY	05/24/2021	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$160.00	2021-2021	Loss
2023305083	INDEMNITY	01/02/2020	LINWOOD CITY	M-PHYSICIAN FEES	\$600.00	2020-2020	Loss
2023306945	INDEMNITY	05/31/2023	EGG HARBOR TOWNSHIP	M-PHYSICIAN FEES	\$110.00	2023-2023	Loss
2023308010	INDEMNITY	06/29/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$925.00	2023-2023	Loss
2024320664	INDEMNITY	11/30/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$880.00	2023-2023	Loss
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$240.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$3,075.00</b>		
<b>Check Number: 45619    Check Date: 03/26/2024    Payee Name: FERNANDO J. DELASOTTA MD</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-ORTHO/NEURO FEES	\$115.00	2020-2020	Loss
2021234332	INDEMNITY	04/05/2021	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$115.00	2021-2021	Loss





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Amount:</b>					<b>\$230.00</b>		
<b>Check Number: 45620      Check Date: 03/26/2024      Payee Name: CAPE EMERGENCY PHYSICIANS, PA</b>							
2024323265	INDEMNITY	01/05/2024	LOWER TOWNSHIP	M-PHYSICIAN FEES	\$1,037.44	2024-2024	Loss
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	M-PHYSICIAN FEES	\$1,037.44	2024-2024	Loss
2024327898	MEDICAL ONLY	02/27/2024	AVALON BOROUGH	M-PHYSICIAN FEES	\$1,037.44	2024-2024	Loss
<b>Check Amount:</b>					<b>\$3,112.32</b>		
<b>Check Number: 45621      Check Date: 03/26/2024      Payee Name: ONE CALL CARE DIAGNOSTICS</b>							
2021237391	INDEMNITY	05/11/2021	GALLOWAY TOWNSHIP	M-MRI	\$1,200.00	2021-2021	Loss
2021240978	INDEMNITY	12/30/2020	EGG HARBOR TOWNSHIP	M-MRI	\$75.00	2020-2020	Loss
2024320664	INDEMNITY	11/30/2023	PLEASANTVILLE CITY	M-MRI	\$1,560.00	2023-2023	Loss
2024322176	INDEMNITY	12/19/2023	OCEAN CITY	M-MRI	\$300.00	2023-2023	Loss
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	M-MRI	\$485.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$3,620.00</b>		
<b>Check Number: 45622      Check Date: 03/26/2024      Payee Name: MEDILINK HOMECARE, INC.</b>							
2024319131	MEDICAL ONLY	10/20/2023	DENNIS TOWNSHIP	M-HOME HEALTH	\$1,495.64	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,495.64</b>		
<b>Check Number: 45623      Check Date: 03/26/2024      Payee Name: MATTHEW J PITERA MD PA</b>							
2022259943	INDEMNITY	01/04/2022	MILLVILLE CITY	M-BEHAVIORAL HEALTH	\$385.00	2022-2022	Loss
<b>Check Amount:</b>					<b>\$385.00</b>		
<b>Check Number: 45624      Check Date: 03/26/2024      Payee Name: ATLANTICARE SURGERY CENTER EHT</b>							
2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-AMBULATORY SURGERY CENTER	\$925.31	2020-2020	Loss
<b>Check Amount:</b>					<b>\$925.31</b>		
<b>Check Number: 45625      Check Date: 03/26/2024      Payee Name: ROTHMAN ORTHOPAEDICS</b>							
2023290740	INDEMNITY	12/08/2022	VENTNOR CITY	M-ORTHO/NEURO FEES	\$114.84	2022-2022	Loss
<b>Check Amount:</b>					<b>\$114.84</b>		
<b>Check Number: 45626      Check Date: 03/26/2024      Payee Name: NovaCare Rehabilitation</b>							
2024315944	INDEMNITY	10/05/2023	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2023-2023	Loss
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	M-PHYSICIAN FEES	\$302.82	2024-2024	Loss
<b>Check Amount:</b>					<b>\$605.64</b>		





## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
<b>Check Number: 45627    Check Date: 03/26/2024    Payee Name: ATLANTIC RADIOLOGISTS PROFESSIONAL ASSOCIATION, LLC</b>							
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	M-PHYSICIAN FEES	\$344.81	2024-2024	Loss
<b>Check Amount:</b>					<b>\$344.81</b>		
<b>Check Number: 45628    Check Date: 03/26/2024    Payee Name: CAPE REGIONAL URGENT CARE</b>							
2024309301	INDEMNITY	07/17/2023	CAPE MAY CITY	M-URGENT CARE CENTER	\$79.48	2023-2023	Loss
2024318856	MEDICAL ONLY	11/03/2023	NORTH WILDWOOD CITY	M-URGENT CARE CENTER	\$183.10	2023-2023	Loss
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-URGENT CARE CENTER	\$79.48	2024-2024	Loss
2024325050	MEDICAL ONLY	01/25/2024	OCEAN CITY	M-URGENT CARE CENTER	\$298.59	2024-2024	Loss
<b>Check Amount:</b>					<b>\$640.65</b>		
<b>Check Number: 45629    Check Date: 03/26/2024    Payee Name: SHORE URGENT CARE</b>							
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	M-URGENT CARE CENTER	\$140.00	2024-2024	Loss
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	M-URGENT CARE CENTER	\$140.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$280.00</b>		
<b>Check Number: 45630    Check Date: 03/26/2024    Payee Name: PREMIER ORTHOPAEDIC &amp; SPORTS MEDICINE ASSOCIATES OF SNJ LLC</b>							
2024313044	INDEMNITY	09/06/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$88.09	2023-2023	Loss
2024314149	MEDICAL ONLY	09/19/2023	MILLVILLE CITY	M-OCCUPATIONAL MEDICINE	\$12.33	2023-2023	Loss
2024315985	INDEMNITY	10/05/2023	MILLVILLE CITY	M-ORTHO/NEURO FEES	\$88.09	2023-2023	Loss
2024325279	MEDICAL ONLY	01/28/2024	MILLVILLE CITY	M-OCCUPATIONAL MEDICINE	\$61.66	2024-2024	Loss
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	M-OCCUPATIONAL MEDICINE	\$88.09	2024-2024	Loss
2024328173	MEDICAL ONLY	02/28/2024	MILLVILLE CITY	M-OCCUPATIONAL MEDICINE	\$140.94	2024-2024	Loss
<b>Check Amount:</b>					<b>\$479.20</b>		
<b>Check Number: 45631    Check Date: 03/26/2024    Payee Name: CAPE PHYSICAL THERAPY LLC</b>							
2024312757	INDEMNITY	09/05/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$228.00	2023-2023	Loss
2024312850	INDEMNITY	09/06/2023	CAPE MAY CITY	M-PHYSICIAN FEES	\$300.00	2023-2023	Loss
2024321646	MEDICAL ONLY	12/12/2023	LOWER TOWNSHIP	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024323497	MEDICAL ONLY	01/10/2024	DENNIS TOWNSHIP	M-PHYSICIAN FEES	\$240.00	2024-2024	Loss
2024323671	INDEMNITY	01/10/2024	SEA ISLE CITY	M-PHYSICIAN FEES	\$150.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$1,098.00</b>		
<b>Check Number: 45632    Check Date: 03/26/2024    Payee Name: THE FRANKEL ORTHOPEDICS AND SPORTS</b>							



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024318880	INDEMNITY	11/03/2023	OCEAN CITY	M-ORTHO/NEURO FEES	\$527.92	2023-2023	Loss
2024320664	INDEMNITY	11/30/2023	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$300.00	2023-2023	Loss
<b>Check Amount:</b>					<b>\$827.92</b>		
<b>Check Number: 45633    Check Date: 03/26/2024    Payee Name: MSC GROUP INC</b>							
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	M-DME/PROSTHETICS	\$831.50	2023-2023	Loss
<b>Check Amount:</b>					<b>\$831.50</b>		
<b>Check Number: 45634    Check Date: 03/26/2024    Payee Name: BAYFRONT EMERGENCY PHYSICIANS, PA</b>							
2024324683	INDEMNITY	01/23/2024	UPPER TOWNSHIP	M-PHYSICIAN FEES	\$536.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$536.00</b>		
<b>Check Number: 45635    Check Date: 03/26/2024    Payee Name: TRICARE MEDICAL TRANSPORTATION</b>							
2024320664	INDEMNITY	11/30/2023	PLEASANTVILLE CITY	M-OTHER PROVIDER FEES	\$1,030.00	2023-2023	Loss
2024326524	INDEMNITY	02/09/2024	PLEASANTVILLE CITY	M-OTHER PROVIDER FEES	\$976.00	2024-2024	Loss
<b>Check Amount:</b>					<b>\$2,006.00</b>		
<b>Check Number: 45636    Check Date: 03/26/2024    Payee Name: CAPE MAY CITY EMS</b>							
2024311382	INDEMNITY	08/15/2023	CAPE MAY CITY	M-OTHER PROVIDER FEES	\$1,008.40	2023-2023	Loss
<b>Check Amount:</b>					<b>\$1,008.40</b>		
<b>Check Number: 45637    Check Date: 03/26/2024    Payee Name: NEUROSURGICAL AND SPINE SPECIALIST LLC</b>							
2023294583	INDEMNITY	01/03/2023	NORTH WILDWOOD CITY	M-ORTHO/NEURO FEES	\$193.72	2023-2023	Loss
2024308324	INDEMNITY	07/05/2023	OCEAN CITY	M-ORTHO/NEURO FEES	\$270.89	2023-2023	Loss
<b>Check Amount:</b>					<b>\$464.61</b>		
<b>Check Number: 45638    Check Date: 03/26/2024    Payee Name: SOUTHERN OCEAN MEDICAL CENTER</b>							
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	M-ACUTE CARE HOSPITAL	\$8,428.06	2024-2024	Loss
<b>Check Amount:</b>					<b>\$8,428.06</b>		
<b>Check Number: 45639    Check Date: 03/26/2024    Payee Name: myMATRIXX</b>							
2022263876	INDEMNITY	02/06/2022	HAMILTON TOWNSHIP	M-PHARMACY	\$5.13	2022-2022	Loss
<b>Check Amount:</b>					<b>\$5.13</b>		
<b>Check Number: 45640    Check Date: 03/26/2024    Payee Name: ORTHONJ, LLC</b>							
2020206029	INDEMNITY	05/24/2020	VENTNOR CITY	M-ORTHO/NEURO FEES	\$427.02	2020-2020	Loss
2021234332	INDEMNITY	04/05/2021	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$85.32	2021-2021	Loss



## Check Register

Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024317486	INDEMNITY	10/22/2023	STONE HARBOR BOROUGH	M-PHYSICIAN FEES	\$85.32	2023-2023	Loss
2024321646	MEDICAL ONLY	12/12/2023	LOWER TOWNSHIP	M-ORTHO/NEURO FEES	\$330.43	2023-2023	Loss
2024322903	MEDICAL ONLY	01/03/2024	VENTNOR CITY	M-PHYSICIAN FEES	\$85.32	2024-2024	Loss
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-ORTHO/NEURO FEES	\$538.95	2024-2024	Loss
2024323671	INDEMNITY	01/10/2024	SEA ISLE CITY	M-ORTHO/NEURO FEES	\$173.89	2024-2024	Loss
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	M-ORTHO/NEURO FEES	\$125.59	2024-2024	Loss
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	M-ORTHO/NEURO FEES	\$125.59	2024-2024	Loss
2024329120	MEDICAL ONLY	03/05/2024	SOMERS POINT CITY	M-ORTHO/NEURO FEES	\$239.32	2024-2024	Loss

**Check Amount: \$2,216.75**

<b>Check Number: 45641</b>	<b>Check Date: 03/26/2024</b>	<b>Payee Name: STRIVE PHYSICAL THERAPY SPECIALISTS LLC</b>
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2021236152	INDEMNITY	04/27/2021	VENTNOR CITY	M-PHYSICIAN FEES	\$270.00	2021-2021	Loss
2024310732	INDEMNITY	08/06/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024312420	INDEMNITY	08/27/2023	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024315688	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024317754	INDEMNITY	10/19/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$90.00	2023-2023	Loss
2024319133	INDEMNITY	10/27/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$270.00	2023-2023	Loss
2024320831	MEDICAL ONLY	12/02/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$180.00	2023-2023	Loss
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	M-PHYSICIAN FEES	\$180.00	2024-2024	Loss

**Check Amount: \$1,530.00**

<b>Check Number: 45642</b>	<b>Check Date: 03/26/2024</b>	<b>Payee Name: ORTHONJ, LLC</b>
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2024318866	MEDICAL ONLY	11/06/2023	WEYMOUTH TOWNSHIP	M-ORTHO/NEURO FEES	\$227.90	2023-2023	Loss
2024326243	MEDICAL ONLY	02/07/2024	HAMILTON TOWNSHIP	M-ORTHO/NEURO FEES	\$121.97	2024-2024	Loss

**Check Amount: \$349.87**

<b>Check Number: 45643</b>	<b>Check Date: 03/26/2024</b>	<b>Payee Name: SOUTH JERSEY REHAB &amp; SPINE INC</b>
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2021214290	INDEMNITY	09/10/2020	HAMILTON TOWNSHIP	M-PHYSICIAN FEES	\$1,300.00	2020-2020	Loss
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	M-PHYSICIAN FEES	\$232.03	2022-2022	Loss
2024309464	INDEMNITY	07/14/2023	PLEASANTVILLE CITY	M-PHYSICIAN FEES	\$1,432.03	2023-2023	Loss

**Check Amount: \$2,964.06**

<b>Check Number: 45644</b>	<b>Check Date: 03/26/2024</b>	<b>Payee Name: OSPREY REHABILITATION LLC</b>
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2024315684	INDEMNITY	10/04/2023	BRIGANTINE CITY	M-PHYSICIAN FEES	\$201.88	2023-2023	Loss
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Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): **199**

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**Check Register**  
 Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024323481	INDEMNITY	01/05/2024	NORTH WILDWOOD CITY	M-PHYSICIAN FEES	\$302.82	2024-2024	Loss
2024324099	INDEMNITY	01/16/2024	WILDWOOD CREST BOROUGH	M-PHYSICIAN FEES	\$100.94	2024-2024	Loss
<b>Check Amount:</b>					<b>\$605.64</b>		

**Check Number: 45645      Check Date: 03/26/2024      Payee Name: ISO SERVICES INC**

2020204206	INDEMNITY	05/01/2020	BRIGANTINE CITY	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021214307	INDEMNITY	09/09/2020	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021215991	INDEMNITY	09/28/2020	MARGATE CITY	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021219651	INDEMNITY	11/05/2020	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021219674	INDEMNITY	11/08/2020	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021219704	INDEMNITY	11/08/2020	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021222460	INDEMNITY	12/04/2020	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021224547	INDEMNITY	12/24/2020	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2020-2020	Expense
2021229140	INDEMNITY	02/08/2021	MILLVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2021230152	INDEMNITY	02/16/2021	SEA ISLE CITY	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2021241957	INDEMNITY	06/30/2021	COMMERCIAL TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2022245184	INDEMNITY	08/10/2021	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2022248448	INDEMNITY	08/30/2021	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2022250708	INDEMNITY	10/05/2021	MILLVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2022251931	INDEMNITY	10/15/2021	SOMERS POINT CITY	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2022256459	INDEMNITY	12/06/2021	HAMILTON TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2021-2021	Expense
2022260883	INDEMNITY	01/07/2022	VENTNOR CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022262929	INDEMNITY	01/29/2022	WEST WILDWOOD BOROUGH	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022263645	INDEMNITY	02/03/2022	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022267947	INDEMNITY	03/16/2022	MILLVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022272287	INDEMNITY	05/05/2022	HAMILTON TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022274827	INDEMNITY	05/31/2022	VENTNOR CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022275919	INDEMNITY	06/13/2022	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2022276965	INDEMNITY	06/24/2022	WILDWOOD CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023279027	INDEMNITY	07/25/2022	SOMERS POINT CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023280970	INDEMNITY	05/30/2022	SEA ISLE CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 200



**Check Register**  
 Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2023281071	INDEMNITY	08/22/2022	STONE HARBOR BOROUGH	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023281537	INDEMNITY	08/26/2022	COMMERCIAL TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023288213	INDEMNITY	11/01/2022	OCEAN CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023288755	INDEMNITY	11/14/2022	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023289340	INDEMNITY	11/18/2022	OCEAN CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023290862	INDEMNITY	12/09/2022	SEA ISLE CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2023291543	INDEMNITY	12/18/2022	MILLVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2022-2022	Expense
2024311081	BODILY INJURY	08/06/2023	WILDWOOD CREST BOROUGH	E-MISC ALL OTHER GL	\$13.75	2023-2023	Expense
2024323702	MEDICAL ONLY	01/06/2024	SOMERS POINT CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325340	INDEMNITY	01/22/2024	WILDWOOD CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325363	INDEMNITY	01/29/2024	MILLVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325411	MEDICAL ONLY	01/30/2024	CAPE MAY CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325500	INDEMNITY	01/26/2024	OCEAN CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325873	MEDICAL ONLY	02/04/2024	GALLOWAY TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325961	MEDICAL ONLY	02/05/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024325968	MEDICAL ONLY	02/05/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326140	BODILY INJURY	08/05/2023	WILDWOOD CITY	E-MISC ALL OTHER GL	\$13.75	2023-2023	Expense
2024326243	MEDICAL ONLY	02/07/2024	HAMILTON TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326306	MEDICAL ONLY	02/06/2024	CAPE MAY CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326421	MEDICAL ONLY	02/08/2024	MARGATE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326502	MEDICAL ONLY	08/18/2023	WEST WILDWOOD BOROUGH	E-MISC ALL OTHER WC	\$13.75	2023-2023	Expense
2024326524	INDEMNITY	02/09/2024	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326560	MEDICAL ONLY	02/11/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326589	MEDICAL ONLY	02/11/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326590	BODILY INJURY	02/09/2024	SOMERS POINT CITY	E-MISC ALL OTHER GL	\$13.75	2024-2024	Expense
2024326622	INDEMNITY	02/11/2024	SEA ISLE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326631	MEDICAL ONLY	02/10/2024	AVALON BOROUGH	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326676	INDEMNITY	02/12/2024	MIDDLE TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326694	INDEMNITY	02/12/2024	PLEASANTVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326742	MEDICAL ONLY	02/13/2024	WILDWOOD CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense

Processed Date: Mar 1, 2024 through Mar 31, 2024  
 Date Of Loss: All  
 Insured Name(s): All  
 Bank Account(s): 1000409678

Insurance Type(s): All  
 Claimant Type(s): All  
 Coverage(s): 201



**Check Register**  
Insurer: AJF-ATL.JOINT INS.FUND

Claim Number	Claimant Type	DOL	Insured Name	Transaction Type	Payment Amount	Policy Period	Payment Type
2024326750	MEDICAL ONLY	02/13/2024	MILLVILLE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326785	INDEMNITY	02/13/2024	OCEAN CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024326848	INDEMNITY	03/08/2023	OCEAN CITY	E-MISC ALL OTHER WC	\$13.75	2023-2023	Expense
2024326900	MEDICAL ONLY	02/14/2024	CAPE MAY CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327219	INDEMNITY	02/18/2024	LONGPORT BOROUGH	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327228	BODILY INJURY	12/18/2023	EGG HARBOR TOWNSHIP	E-MISC ALL OTHER GL	\$13.75	2023-2023	Expense
2024327249	MEDICAL ONLY	02/16/2024	GALLOWAY TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327618	BODILY INJURY	12/29/2023	WATERFORD TOWNSHIP	E-MISC ALL OTHER GL	\$13.75	2023-2023	Expense
2024327870	MEDICAL ONLY	02/26/2024	HAMILTON TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327898	MEDICAL ONLY	02/27/2024	AVALON BOROUGH	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327911	MEDICAL ONLY	02/27/2024	GALLOWAY TOWNSHIP	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327912	MEDICAL ONLY	02/27/2024	MARGATE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024327988	MEDICAL ONLY	02/27/2024	MARGATE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense
2024328083	MEDICAL ONLY	02/28/2024	SEA ISLE CITY	E-MISC ALL OTHER WC	\$13.75	2024-2024	Expense

**Check Amount: \$962.50**

**Check Number: 45646    Check Date: 03/26/2024    Payee Name: QUALCARE INC**

2024329714	MEDICAL ONLY	03/18/2024	CAPE MAY CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss
2024329922	MEDICAL ONLY	03/19/2024	CAPE MAY CITY	M-MEDICAL REHAB/NON VOCATIONAL WC	\$565.00	2024-2024	Loss

**Check Amount: \$1,130.00**

**Total of ATLANTIC CNTY JIF IV Account**

<b>Number of Checks:</b>	<b>310</b>	<b>Total Payments:</b>	<b>\$600,414.30</b>
<b>Number of Payments:</b>	<b>989</b>	<b>First Check Number:</b>	<b>45337</b>
<b>Expense Payments:</b>	<b>\$27,699.89</b>	<b>Last Check Number:</b>	<b>45646</b>
<b>Legal Payments:</b>	<b>\$97,175.32</b>		
<b>Loss Payments:</b>	<b>\$475,539.09</b>		

**Grand Total**

<b>Number of Checks:</b>	<b>310</b>	<b>Total Payments:</b>	<b>\$600,414.30</b>
<b>Number of Payments:</b>	<b>989</b>	<b>First Check Number:</b>	<b>45337</b>
<b>Expense Payments:</b>	<b>\$27,699.89</b>	<b>Last Check Number:</b>	<b>45646</b>
<b>Legal Payments:</b>	<b>\$97,175.32</b>		
<b>Loss Payments:</b>	<b>\$475,539.09</b>		

Processed Date: Mar 1, 2024 through Mar 31, 2024  
Date Of Loss: All  
Insured Name(s): All  
Bank Account(s): 1000409678

Insurance Type(s): All  
Claimant Type(s): All  
Coverage(s): **202**

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SUBROGATION BY YEAR  
AND ADJUSTMENT RECEIPTS PER MONTH

DESCRIPTION	TOTAL	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
<b>RECOVERY REGISTER</b>													
EXCESS REIMBURSEMENTS	\$ -												
SUBROGATION	\$ 216,850.63	\$ 38,111.70	\$ 106,800.18	\$ 71,938.75									
REFUNDS	\$ -												
ALL OTHER	\$ -												
TOTALS	\$ 216,850.63	\$ 38,111.70	\$ 106,800.18	\$ 71,938.75	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>ADJUSTMENT REGISTER-TOTAL</b>													
	\$ 23,383.01	\$ 21,606.01	\$ -	\$ 1,777.00									
<b>OTHER RECEIPTS</b>													
OVER PAYMENT FOR RMC	\$ 4,485.00	\$ 4,485.00											
	\$ -												
	\$ -												
	\$ -												
INVESTMENTS REDEEMED	\$ -												
	\$ 4,485.00	\$ 4,485.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
INTEREST-CITIZENS BANK /INVESTORS BANK	\$ 62,614.12	\$ 20,987.94	\$ 18,327.36	\$ 23,298.82									
<b>ASSESSMENTS:</b>													
CURRENT YEAR-APPLIED FROM DIVIDEND	\$ 87,329.00	\$ 87,329.00											
CURRENT YEAR	\$ 5,156,164.00	\$ 736,369.00	\$ 4,419,795.00										
	\$ 5,243,493.00	\$ 823,698.00	\$ 4,419,795.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ 5,550,825.76	\$ 908,888.65	\$ 4,544,922.54	\$ 97,014.57	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CHECK EQUAL -0-	\$ -												
BANK STATEMENT LESS SWEEP -actual cash-no prepaid dividend	\$ 5,550,825.76												
CHECK EQUAL -0-	\$ -												
<b>RECOVERY REGISTER</b>													
<b>SUBROGATION BY YEAR</b>													
2024	\$ 4,378.68		\$ 3,986.65	\$ 392.03									
2023	\$ 63,290.84	\$ 14,317.42	\$ 48,773.42	\$ 200.00									
2022	\$ 93,405.15	\$ 22,660.75	\$ 245.71	\$ 70,498.69									
2021	\$ 51,445.03	\$ 498.00	\$ 50,947.03										
2020	\$ 1,366.55	\$ 208.33	\$ 949.89	\$ 208.33									
2019	\$ 1,342.89		\$ 1,342.89										
2018	\$ -												
2017	\$ -												
2016	\$ 1,082.01	\$ 407.46	\$ 54.59	\$ 619.96									
2015	\$ -												
2014	\$ -												
2013	\$ 39.48	\$ 19.74		\$ 19.74									
2012	\$ 500.00		\$ 500.00										
2010	\$ -												
2009	\$ -												
	\$ 216,850.63	\$ 38,111.70	\$ 106,800.18	\$ 71,938.75	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CHECK EQUAL -0-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>REFUNDS AND OTHER</b>													
2024	\$ -												
2023	\$ -												
2022	\$ -												
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CHECK EQUAL -0-	\$ -												





**Adjustment Register**  
 Insurer: AJF-ATL.JOINT INS.FUND

Payment Method Type: Reimbursement

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Policy Period	Payment Type	Payment Amount
		2022271533	03/08/2024	INDEMNITY	04/27/2022	E-ALLOCATED MED EXAM WC	STONE HARBOR BOROUGH	STONE HARBOR BOROUGH	Alexandria McMurren	2022-2022	Expense	(\$400.00)
		2023292379	03/02/2024	POLICE PROF BI	12/27/2020	L-LEGAL GL	GALLOWAY TOWNSHIP	GALLOWAY TOWNSHIP	William Kissane	2020-2020	Legal	(\$1,377.00)
<b>Reimbursement Total:</b>										<b>2</b>		<b>(\$1,777.00)</b>





**Adjustment Register**  
 Insurer: AJF-ATL.JOINT INS.FUND

Payment Method Type: Void

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Policy Period	Payment Type	Payment Amount
41681	05/02/2023	2021215885	03/08/2024	BODILY INJURY	09/05/2020	L-LEGAL GL	COOPER LEVENSON, PA	BRIGANTINE CITY	Dominic Spaventa	2020-2020	Legal	(\$5,604.04)
44399	12/12/2023	2021236549	03/18/2024	INDEMNITY	04/30/2021	I-PERMANENT PARTIAL DISABILITY	Owen Mastrocola	PLEASANTVILLE CITY	Alexandria McMurren	2021-2021	Loss	(\$1,497.28)
<b>Void Total:</b>										<b>2</b>	<b>(\$7,101.32)</b>	
<b>Grand Total:</b>										<b>4</b>	<b>(\$8,878.32)</b>	
<b>Reimbursement Total:</b>										<b>2</b>	<b>(\$1,777.00)</b>	
<b>Reversal Total:</b>										<b>0</b>	<b>\$0.00</b>	
<b>Reverse/Copy Total:</b>										<b>0</b>	<b>\$0.00</b>	
<b>Stop Pay Total:</b>										<b>0</b>	<b>\$0.00</b>	
<b>Void Total:</b>										<b>2</b>	<b>(\$7,101.32)</b>	



**Recovery Register**  
**Insurer: AJF-ATL.JOINT INS.FUND**

**Line: PROPERTY**

**Policy Period: 2013-2013**

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		001189736	03/21/2024	COMPREHENSIVE	12/04/2013	R-SUBROGATION COLL/COMP	FOLSOM BOROUGH	FOLSOM BOROUGH	Tanya Johnson	Loss	(\$9.87)
		001189736	03/21/2024	COMPREHENSIVE	12/04/2013	R-SUBROGATION COLL/COMP	FOLSOM BOROUGH	FOLSOM BOROUGH	Tanya Johnson	Loss	(\$9.87)
									2013-2013 Total:	2	(\$19.74)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	2	(\$19.74)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00

**Policy Period: 2016-2016**

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		001253916	03/02/2024	1ST PARTY COLL PD	07/12/2016	R-SUBROGATION COLL/COMP	NORTH WILDWOOD CITY	NORTH WILDWOOD CITY	Tanya Johnson	Loss	(\$619.96)
									2016-2016 Total:	1	(\$619.96)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	1	(\$619.96)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00

**Policy Period: 2020-2020**

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		2021221250	03/02/2024	INLAND MARINE	10/31/2020	R-SUBROGATION OTR LOSS PR	SEA ISLE CITY	SEA ISLE CITY	Tanya Johnson	Loss	(\$208.33)
									2020-2020 Total:	1	(\$208.33)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	1	(\$208.33)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00

**Policy Period: 2022-2022**

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		2022277203	03/19/2024	1ST PARTY COLL PD	06/26/2022	R-SUBROGATION COLL/COMP	EGG HARBOR TOWNSHIP	EGG HARBOR TOWNSHIP	Tanya Johnson	Loss	(\$36,165.38)
		2023280391	03/22/2024	1ST PARTY COLL PD	08/09/2022	R-SUBROGATION COLL/COMP	EGG HARBOR TOWNSHIP	EGG HARBOR TOWNSHIP	Tanya Johnson	Loss	(\$31,312.31)



## Recovery Register

Insurer: AJF-ATL.JOINT INS.FUND

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
									2022-2022 Total:	2	(\$67,477.69)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	2	(\$67,477.69)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00

**Policy Period: 2023-2023**

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		2024321813	03/21/2024	INLAND MARINE	10/30/2023	R-SUBROGATION OTR LOSS PR	HAMILTON TOWNSHIP	HAMILTON TOWNSHIP	Tanya Johnson	Loss	(\$200.00)
									2023-2023 Total:	1	(\$200.00)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	1	(\$200.00)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00

**Policy Period: 2024-2024**

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		2024325938	03/02/2024	INLAND MARINE	01/22/2024	R-SUBROGATION OTR LOSS PR	GALLOWAY TOWNSHIP	GALLOWAY TOWNSHIP	Tanya Johnson	Loss	(\$392.03)
									2024-2024 Total:	1	(\$392.03)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	1	(\$392.03)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00
									PROPERTY Total:	8	(\$68,917.75)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	8	(\$68,917.75)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00



**Recovery Register**  
**Insurer: AJF-ATL.JOINT INS.FUND**  
**Line: WORKERS COMPENSATION**

Policy Period: 2022-2022

Check Number	Check Date	Claim Number	Processed Date	Claimant Type	DOL	Transaction Type	Payee Name	Insured Name	Examiner	Payment Type	Payment Amount
		2023283434	03/02/2024	INDEMNITY	09/17/2022	R-SUBROGATION MED	NORTH WILDWOOD CITY	NORTH WILDWOOD CITY	Bryana Suggs	Loss	(\$2,509.80)
		2023283434	03/02/2024	INDEMNITY	09/17/2022	R-SUBROGATION EXP WC	NORTH WILDWOOD CITY	NORTH WILDWOOD CITY	Bryana Suggs	Expense	(\$490.20)
		2023277418	03/07/2024	MEDICAL ONLY	07/04/2022	R-SUBROGATION MED	MILLVILLE CITY	MILLVILLE CITY	Denise Hinton-Wilson	Loss	(\$21.00)
									2022-2022 Total:	3	(\$3,021.00)
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	3	(\$3,021.00)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00
									<b>WORKERS COMPENSATION Total:</b>	<b>3</b>	<b>(\$3,021.00)</b>
									Excess Reimbursement Total:	0	\$0.00
									Subrogation Total:	3	(\$3,021.00)
									Refund Total:	0	\$0.00
									All Other Total:	0	\$0.00
									<b>Grand Total:</b>	<b>11</b>	<b>(\$71,938.75)</b>
									<b>Excess Reimbursement Total:</b>	<b>0</b>	<b>\$0.00</b>
									<b>Subrogation Total:</b>	<b>11</b>	<b>(\$71,938.75)</b>
									<b>Refund Total:</b>	<b>0</b>	<b>\$0.00</b>
									<b>All Other Total:</b>	<b>0</b>	<b>\$0.00</b>

***SECTION C***

***BUDGET STATUS  
REPORT***

SUMMARY OF CASH TRANSACTIONS												
FUND YEAR	2024											
Month Ending:	March											
	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL
OPEN BALANCE	208,414.84	439,461.87	77,943.38	1,672,091.25	83,819.85	440,797.75	203,872.07	(312,294.48)	(90,814.50)	562,938.82	0.00	3,286,230.86
RECEIPTS												
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Refunds	392.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	392.03
Invest Pymnts	446.53	941.56	167.00	3,582.49	0.00	944.42	0.00	0.00	0.00	1,206.11	0.00	7,288.11
Invest Adj	4.06	8.56	1.52	32.59	0.00	8.59	0.00	0.00	0.00	10.97	0.00	66.29
Subtotal Invest	450.59	950.12	168.52	3,615.08	0.00	953.01	0.00	0.00	0.00	1,217.08	0.00	7,354.40
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	842.62	950.12	168.52	3,615.08	0.00	953.01	0.00	0.00	0.00	1,217.08	0.00	7,746.43
EXPENSES												
Claims Transfers	32,270.57	13.75	0.00	95,282.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	127,567.23
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	273,600.72	0.00	273,600.72
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	32,270.57	13.75	0.00	95,282.91	0.00	0.00	0.00	0.00	0.00	273,600.72	0.00	401,167.95
END BALANCE	176,986.89	440,398.24	78,111.90	1,580,423.42	83,819.85	441,750.76	203,872.07	(312,294.48)	(90,814.50)	290,555.18	0.00	2,892,809.34

SUMMARY OF CASH TRANSACTIONS												
FUND YEAR	2023											
Month Ending:	March											
	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL
OPEN BALANCE	116,695.05	2,172,263.88	439,953.26	7,457,376.26	(2,777.00)	2,408,920.04	311.00	0.10	0.00	416,499.32	0.00	13,009,241.91
RECEIPTS												
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Refunds	200.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	200.00
Invest Pymnts	250.02	4,654.12	942.61	15,977.58	0.00	5,161.16	0.00	0.00	0.00	892.36	0.00	27,877.85
Invest Adj	2.27	42.34	8.57	145.34	0.00	46.95	0.00	0.00	0.00	8.12	0.00	253.59
Subtotal Invest	252.29	4,696.46	951.18	16,122.92	0.00	5,208.11	0.00	0.00	0.00	900.48	0.00	28,131.44
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	452.29	4,696.46	951.18	16,122.92	0.00	5,208.11	0.00	0.00	0.00	900.48	0.00	28,331.44
EXPENSES												
Claims Transfers	4,813.90	3,068.75	1,018.02	167,830.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	176,730.80
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	910.00	0.00	910.00
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	4,813.90	3,068.75	1,018.02	167,830.13	0.00	0.00	0.00	0.00	0.00	910.00	0.00	177,640.80
END BALANCE	112,333.44	2,173,891.59	439,886.42	7,305,669.05	(2,777.00)	2,414,128.15	311.00	0.10	0.00	416,489.80	0.00	12,859,932.55

SUMMARY OF CASH TRANSACTIONS												
FUND YEAR	2022											
Month Ending:	March											
	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL
OPEN BALANCE	109,516.59	2,040,018.81	398,454.02	3,470,801.96	(6,106.60)	2,046,203.48	0.00	(0.50)	0.00	358,438.78	436,546.84	8,853,873.38
RECEIPTS												
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Refunds	67,477.69	0.00	0.00	3,021.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,498.69
Invest Pymnts	234.64	4,370.78	853.70	7,436.26	0.00	4,384.03	0.00	0.00	0.00	767.96	935.31	18,982.68
Invest Adj	2.13	39.76	7.77	67.64	0.00	39.88	0.00	0.00	0.00	6.99	8.51	172.68
Subtotal Invest	236.77	4,410.54	861.47	7,503.90	0.00	4,423.91	0.00	0.00	0.00	774.95	943.82	19,155.36
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	67,714.46	4,410.54	861.47	10,524.90	0.00	4,423.91	0.00	0.00	0.00	774.95	943.82	89,654.05
EXPENSES												
Claims Transfers	2,658.55	4,679.00	0.00	128,763.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136,101.44
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	2,658.55	4,679.00	0.00	128,763.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136,101.44
END BALANCE	174,572.50	2,039,750.35	399,315.49	3,352,562.97	(6,106.60)	2,050,627.39	0.00	(0.50)	0.00	359,213.73	437,490.66	8,807,425.99

SUMMARY OF CASH TRANSACTIONS												
FUND YEAR	2021											
Month Ending:	March											
	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL
OPEN BALANCE	228,763.14	1,585,274.85	279,500.48	288,699.64	(45,632.79)	1,856,159.71	0.00	45,631.00	0.00	207,705.50	0.00	4,446,101.53
RECEIPTS												
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Invest Pymnts	490.13	3,396.48	598.84	618.54	0.00	3,976.86	0.00	0.00	0.00	445.01	0.00	9,525.86
Invest Adj	4.46	30.90	5.45	5.63	0.00	36.17	0.00	0.00	0.00	4.05	0.00	86.66
Subtotal Invest	494.59	3,427.38	604.29	624.17	0.00	4,013.03	0.00	0.00	0.00	449.06	0.00	9,612.52
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	494.59	3,427.38	604.29	624.17	0.00	4,013.03	0.00	0.00	0.00	449.06	0.00	9,612.52
EXPENSES												
Claims Transfers	0.00	27,878.75	11,208.25	53,992.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93,079.67
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	0.00	27,878.75	11,208.25	53,992.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93,079.67
END BALANCE	229,257.73	1,560,823.48	268,896.52	235,331.14	(45,632.79)	1,860,172.74	0.00	45,631.00	0.00	208,154.56	0.00	4,362,634.38

SUMMARY OF CASH TRANSACTIONS													
FUND YEAR	2020												
Month Ending:	March												
	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL	
OPEN BALANCE	142,987.54	526,641.98	203,177.79	445,658.71	(35,019.56)	1,946,882.90	0.00	34,245.80	0.00	142,062.23	38,505.73	3,445,143.12	
RECEIPTS													
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Refunds	208.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	208.33	
Invest Pymnts	306.35	1,128.34	435.31	954.83	0.00	4,171.24	0.00	0.00	0.00	304.37	82.50	7,382.94	
Invest Adj	2.79	10.26	3.96	8.69	0.00	37.94	0.00	0.00	0.00	2.77	0.75	67.16	
Subtotal Invest	309.14	1,138.60	439.27	963.52	0.00	4,209.18	0.00	0.00	0.00	307.14	83.25	7,450.10	
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	517.47	1,138.60	439.27	963.52	0.00	4,209.18	0.00	0.00	0.00	307.14	83.25	7,658.43	
EXPENSES													
Claims Transfers	1,474.92	30,131.98	2,900.00	20,219.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,726.84	
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Other *	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	1,474.92	30,131.98	2,900.00	20,219.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,726.84	
END BALANCE	142,030.09	497,648.60	200,717.06	426,402.29	(35,019.56)	1,951,092.08	0.00	34,245.80	0.00	142,369.37	38,588.98	3,398,074.71	

SUMMARY OF CASH TRANSACTIONS													
FUND YEAR	Closed FY												
Month Ending:	March												
	Property	Liability	Auto	Workers Comp	POL/EPL	Deductible	Cyber JIF	MEL	EJIF	Admin	Contingency	TOTAL	
OPEN BALANCE	1,987.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,052,272.79	0.00	14,054,260.39	
RECEIPTS													
Assessments	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Refunds	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Invest Pymnts	4.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,107.27	0.00	30,111.53	
Invest Adj	0.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	273.87	0.00	273.91	
Subtotal Invest	4.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,381.14	0.00	30,385.44	
Other *	639.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	639.70	
TOTAL	644.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,381.14	0.00	31,025.14	
EXPENSES													
Claims Transfers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Expenses	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Other *	3,330.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,330.00	
TOTAL	3,330.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,330.00	
END BALANCE	(698.40)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,082,653.93	0.00	14,081,955.53	



**CERTIFICATION AND RECONCILIATION OF CLAIMS PAYMENTS AND RECOVERIES  
ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

Month **March**  
Current Fund Year **2024**

Policy Year	Coverage	1.	2.	3.	4.	5.	6.	7.	8.
		Calc. Net Paid Thru Last Month	Monthly Net Paid March	Monthly Recoveries March	Calc. Net Paid Thru March	TPA Net Paid Thru March	Variance To Be Reconciled	Delinquent Unreconciled Variance From	Change This Month
2024	Property	23,256.46	32,270.57	392.03	55,135.00	55,135.00	0.00	0.00	0.00
	Liability	13.75	13.75	0.00	27.50	27.50	0.00	0.00	0.00
	Auto	1,073.17	0.00	0.00	1,073.17	1,073.17	0.00	0.00	0.00
	Workers Comp	75,652.46	95,282.91	0.00	170,935.37	170,935.37	0.00	0.00	0.00
	<b>Total</b>	<b>99,995.84</b>	<b>127,567.23</b>	<b>392.03</b>	<b>227,171.04</b>	<b>227,171.04</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
2023	Property	1,064,742.94	4,813.90	200.00	1,069,356.84	1,069,356.84	0.00	0.00	(0.00)
	Liability	107,957.99	3,068.75	0.00	111,026.74	111,026.74	0.00	0.00	0.00
	Auto	36,152.89	1,018.02	0.00	37,170.91	37,170.91	(0.00)	0.00	(0.00)
	Workers Comp	2,197,144.41	167,830.13	0.00	2,364,974.54	2,364,974.54	0.00	0.00	0.00
	<b>Total</b>	<b>3,405,998.23</b>	<b>176,730.80</b>	<b>200.00</b>	<b>3,582,529.03</b>	<b>3,582,529.03</b>	<b>(0.00)</b>	<b>0.00</b>	<b>(0.00)</b>
2022	Property	1,009,387.85	2,658.55	67,477.69	944,568.71	944,568.71	0.00	0.00	0.00
	Liability	148,091.59	4,679.00	0.00	152,770.59	152,770.59	0.00	0.00	0.00
	Auto	58,322.55	0.00	0.00	58,322.55	58,322.55	0.00	0.00	0.00
	Workers Comp	4,176,485.11	128,763.89	3,021.00	4,302,228.00	4,302,228.00	0.00	0.00	0.00
	<b>Total</b>	<b>5,392,287.10</b>	<b>136,101.44</b>	<b>70,498.69</b>	<b>5,457,889.85</b>	<b>5,457,889.85</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
2021	Property	947,600.90	0.00	0.00	947,600.90	947,600.90	(0.00)	(0.00)	0.00
	Liability	597,092.40	27,878.75	0.00	624,971.15	624,971.15	0.00	0.00	0.00
	Auto	96,484.49	11,208.25	0.00	107,692.74	107,692.74	0.00	0.00	0.00
	Workers Comp	6,986,729.81	53,992.67	0.00	7,040,722.48	7,040,722.48	0.00	0.00	(0.00)
	<b>Total</b>	<b>8,627,907.60</b>	<b>93,079.67</b>	<b>0.00</b>	<b>8,720,987.27</b>	<b>8,720,987.27</b>	<b>(0.00)</b>	<b>0.00</b>	<b>(0.00)</b>
2020	Property	928,961.42	1,474.92	208.33	930,228.01	930,228.01	0.00	(0.00)	0.00
	Liability	1,638,144.18	30,131.98	0.00	1,668,276.16	1,668,276.16	0.00	0.00	0.00
	Auto	160,775.98	2,900.00	0.00	163,675.98	163,675.98	0.00	0.00	0.00
	Workers Comp	6,770,472.62	20,219.94	0.00	6,790,692.56	6,790,692.56	0.00	(0.00)	0.00
	<b>Total</b>	<b>9,498,354.20</b>	<b>54,726.84</b>	<b>208.33</b>	<b>9,552,872.71</b>	<b>9,552,872.71</b>	<b>0.00</b>	<b>(0.00)</b>	<b>0.00</b>
Closed FY	Property	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Auto	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Workers Comp	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	<b>Total</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>TOTAL</b>		<b>27,024,542.97</b>	<b>588,205.98</b>	<b>71,299.05</b>	<b>27,541,449.90</b>	<b>27,541,449.90</b>	<b>(0.00)</b>	<b>0.00</b>	<b>(0.00)</b>

***SECTION D***  
***BILL LIST REVIEW***

**ATLANTIC COUNTY MUNICIPAL JIF  
BILL LIST - APRIL 2024**

	<b>Payable To:</b>	<b>FY 2024</b>	<b>FY 2023</b>	<b>Appropriation</b>	<b>Description</b>
1	Risk Program Administrators LLC	<b>90,345.00</b>		Prof Services/Administration	April 2024 Fees
2	Risk Program Administrators LLC	<b>37.04</b>		Misc/Postage/Copies/Fax	March 2024 Fees
3	Risk Program Administrators LLC	<b>80.47</b>		Misc/Meeting Expense	QR holder and QR app; split
4	The DeWeese Law Firm, P.C.	<b>11,780.00</b>		Prof Services/Attorney	April 2024 Fees
5	Qual-Lynx	<b>73,432.00</b>		Prof Services/Claims Administration	April 2024 Fees
6	Joyce Media	<b>390.00</b>		Misc/JIF Website	April 2024 Fees
7	Christopher J. Winter Sr.	<b>2,083.00</b>		Training/Police Risk Services	Law Enforcement Consultant-April 2024 fee
8	Tracy Forlenza	<b>571.00</b>		Misc/Recording Secretary	April 2024 Fees
9	J.A. Montgomery Consulting	<b>19,019.00</b>		Prof Services/Safety Director/Loss Control	April 2024 Fees
10	Wintsec Consulting LLC	<b>4,584.00</b>		Prof Services/Technology Risk Serv Dir	April 2024 Fees
11	John Hansen	<b>2,167.00</b>		Prof Services/Treasurer	April 2024 Fees
12	John Hansen	<b>9.85</b>		Misc/Postage/Copies/Fax	Virtual meeting March-cks sent
13	Conner Strong & Buckelew	<b>1,031.00</b>		Prof Services/Underwriting Mgr	April 2024 Fees
14	Apex Insurance Services c/o Lexington Insurance	<b>1,029,620.50</b>		EPL/POL Policy - Excess Insurance	EPL, POL, LU Coverage; P#038248748-01; 1/1/24-1/1/25; 2 of 2 installment
15	ARC Reprographics	<b>540.00</b>		Misc/Printing	Safety Breakfast 3/28/24 handouts; Inv#282786
16	Bowman & Company LLP		<b>10,496.50</b>	Prof Services/Auditor	Inv#115602 12/31 Auditor progressive billing
17	Bowman & Company LLP	<b>11,037.00</b>		Prof Services/Payroll Auditor	Inv#115603 2023 payroll auditor progressive billing
18	Conner Strong & Buckelew	<b>2,492.00</b>		Misc/Fidelity Bond (Admin/TPA/Treasurer)	Exe Dir/Treasurer/Claims admin fidelity bond
19	Insight Public Sector SLED	<b>14,333.00</b>		EPL/CYBER/Cyber Risk Services	DBA Wizer; online cyber training, notification, phishing
20	Iron Mountain	<b>144.21</b>		Misc/Records Retention Service	Inv#JJCH931; Storage 4/1-30/24; Service 2/21-3/26/24
21	Merighi's Savoy Inn	<b>7,653.36</b>		Safety Incentive Program	Safety Breakfast 3/28/24
22	William Walsh	<b>600.00</b>		Safety Incentive Program	Safety Breakfast Presentor
23	City of Absecon		<b>2,500.00</b>	Safety Incentive Program	Direct Check Reimbursement
24	Borough of Cape May Point		<b>2,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
25	City of Estell Manor		<b>2,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
26	Borough of Folsom		<b>2,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
27	Hamilton Township		<b>3,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
28	Galloway Township		<b>3,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
29	Lower Township	<b>725.00</b>		EPL/CYBER/EPL/Cyber Incentive Program	Malware
30	City of Margate		<b>2,750.00</b>	Safety Incentive Program	Direct Check Reimbursement
31	City of Millville		<b>3,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
32	Mullica Township		<b>2,250.00</b>	Safety Incentive Program	Direct Check Reimbursement
33	City of Northfield		<b>2,500.00</b>	Safety Incentive Program	Direct Check Reimbursement
34	City of Sea Isle City		<b>2,750.00</b>	Safety Incentive Program	Direct Check Reimbursement
35	City of Ventnor		<b>2,750.00</b>	Safety Incentive Program	Direct Check Reimbursement
36	City of Wildwood		<b>3,000.00</b>	Safety Incentive Program	Direct Check Reimbursement
37	Borough of Wildwood Crest		<b>2,500.00</b>	Safety Incentive Program	Direct Check Reimbursement
38	Glenn Insurance	<b>6,242.00</b>		Risk Management Consultants	1st Qtr Pymts -Somers Pt and Weymouth
39	Siracusa-Kaufman Insurance Agency	<b>1,500.00</b>		Risk Management Consultants	1st Qtr Pymts -Mullica
	<b>Subtotals</b>	<b>1,280,416.43</b>	<b>46,496.50</b>		
	<b>JIF BILL LIST TOTAL</b>		<b>1,326,912.93</b>		

***SECTION E***  
***RECONCILIATIONS***

**ACMJIF  
ACCOUNT ACTIVITY RECONCILIATION  
FY 2024**

	January	February	March	April	May	June	July	August	September	October	November	December
<b>Opening Balance for the Period:</b>	48,980,087.01	47,321,868.53	49,540,465.85	48,853,734.46	48,853,734.46	48,853,734.46	48,853,734.46	48,853,734.46	48,853,734.46	48,853,734.46	48,853,734.46	48,853,734.46
<b>RECEIPTS:</b>												
<b>INTEREST AND INTEREST ACTIVITY</b>												
CITIZENS INVESTORS												
INTEREST	18,226.52	4,956.25	4,484.91									
CITIZENS SWEEP ACCOUNT INTEREST	2,761.42	13,371.11	18,813.89									
JCFI												
JCFI INTEREST	36,381.39	36,154.42	39,974.09									
JCFI ACTIVITY	31,848.31	(108,967.94)	40,579.61									
JCFI ADMINISTRATIVE EXPENSE	(2,210.41)	(9,162.07)	(2,209.94)									
TREASURY												
INTEREST	386,579.21	131,168.48	-									
TREASURY ACTIVITY	14,686.01	(91,606.65)	5,733.98									
TREASURY ADMINISTRATIVE EXPENSE	(2,835.50)	-	-									
<b>TOTAL INTEREST ACTIVITY</b>	<b>485,436.95</b>	<b>(24,086.40)</b>	<b>107,376.54</b>	-	-	-	-	-	-	-	-	-
Premium Assessment Receipts	736,369.00	4,419,795.00										
APPLIED DIVIDENDS TO Premium Assessment Receipts	87,329.00											
<b>TOTAL ASSESSMENT RECEIPTS</b>	<b>823,698.00</b>	<b>4,419,795.00</b>	-	-	-	-	-	-	-	-	-	-
<b>Subrogation &amp; Reimb. Receipts:</b>												
Fund Year 2024	-	3,986.65	392.03									
Fund Year 2023	14,317.42	48,773.42	200.00									
Fund Year 2022	22,660.75	245.71	70,498.69									
Fund Year 2021	498.00	50,947.03	-									
Fund Year 2020	208.33	949.89	208.33									
Closed Fund Year-2019	597.00	1,342.89										
Closed Fund Year-2018												
Closed Fund Year-2017												
Closed Fund Year-2016	407.46	54.59	619.96									
Closed Fund Year-2015												
Closed Fund Year-2014												
Closed Fund Year-2013	19.74		19.74									
Closed Fund Year-2012		500.00										
Closed Fund Year-2011												
Closed Fund Year-2010												
Closed Fund Year-2009												
<b>TOTAL SUBROGATION AND OTHER REFUND</b>	<b>38,708.70</b>	<b>106,600.18</b>	<b>71,938.75</b>	-	-	-	-	-	-	-	-	-
OVERPAYMENT ON 2023 RMC FEE	4,485.00											
<b>TOTAL OTHER RECEIPTS</b>	<b>4,485.00</b>	-	-	-	-	-	-	-	-	-	-	-
<b>TOTAL GRAND RECEIPTS</b>	<b>1,352,328.65</b>	<b>4,502,508.78</b>	<b>179,315.29</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>DISBURSEMENTS:</b>												
<b>Net Claim Payments:</b>												
Fund Year 2024	17,216.11	86,766.38	127,567.23									
Fund Year 2023	358,268.58	247,535.07	176,730.80									
Fund Year 2022	151,436.93	82,031.39	136,101.44									
Fund Year 2021	178,586.90	189,354.13	93,079.67									
Fund Year 2020	66,282.26	218,032.07	54,726.84									
Closed Fund Year-2019		335.72										
Closed Fund Year-2018			3,330.00									
Closed Fund Year-2017												
Closed Fund Year-2016												
Closed Fund Year-2015												
Closed Fund Year-2014												
Closed Fund Year-2013												
Closed Fund Year-2012												
Closed Fund Year-2011												
Closed Fund Year-2010												
Closed Fund Year-2009												
<b>Total Net Claim Payments</b>	<b>879,119.76</b>	<b>824,054.76</b>	<b>591,535.98</b>	-	-	-	-	-	-	-	-	-
<b>Exp. &amp; Admin Bill List Payments:</b>												
Exp. & Cont. Charges FY 2025												
Exp. & Cont. Charges FY 2024	2,089,823.21	1,432,943.50	273,600.72									
Exp. & Cont. Charges FY 2023	29,834.75	11,116.64	910.00									
Exp. & Cont. Charges FY 2022	11,769.42	12,173.73										
Exp. & Cont. Charges FY 2021												
Exp. & Cont. Charges FY 2020												
Closed Fund Year		3,623.00										
MISC:ROUNDING	(0.03)	(0.17)	(0.02)									
<b>Total Bill List Payments</b>	<b>2,131,427.35</b>	<b>1,459,856.70</b>	<b>274,510.70</b>	-	-	-	-	-	-	-	-	-
Auditor's Adjustments	3,010,647.13	2,283,911.46	866,046.68					0.00	0.00	0.00	0.00	0.00
<b>TOTAL DISBURSEMENTS:</b>	<b>3,010,647.13</b>	<b>2,283,911.46</b>	<b>866,046.68</b>	-	-	-	-	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Closing Balance for the Period:</b>	<b>47,321,868.53</b>	<b>49,540,465.85</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>	<b>48,853,734.46</b>
<b>INVESTORS</b>												
Account Net Cash Change During the Period:												
Loss Account	(2,109,867.73)	2,335,065.77	(877,496.15)									
Investment Account	338,499.60	20,777.89	86,985.90									
Wealth Management Account	61,930.05	18,784.01	(81,251.92)									
INVESTMENT:JCFI	66,019.39	(81,975.59)	78,343.76									
Exp & Contn Reconciliation Account	-	-	-									
Claims Imprest Reconciliation Account	(12,799.79)	(74,054.76)	106,687.02									
<b>Total Change in Account Net Cash:</b>	<b>(1,658,218.48)</b>	<b>2,218,597.32</b>	<b>(686,731.39)</b>	-	-	-	-	-	-	-	-	-
<b>Proof:</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

AELCF REVISED  
 FYE 2023

<b>FY2024</b>	
<b>AELCF:</b>	1/31/2024
MEMBERS	
BUENA VISTA TWP	\$ (0.00)
CORBIN CITY	\$ 878.00
EGG HARBOR CITY	\$ 43,908.11
EGG HARBOR TOWNSHIP	\$ 143,563.00
Hamilton Township	\$ 2,011.62
Hammonton	\$ 231,959.00
Lower Township	\$ 0.00
Middle Township	\$ 180,840.17
Mullica Township	\$ 28,953.08
Northfield	\$ 115,129.92
Pleasantville	\$ 12.21
Port Republic	\$ 0.00
Stone Harbor	\$ 9,824.62
Upper Deerfield	\$ 76,826.40
Upper Township	\$ 220,157.61
Waterford	\$ 35,660.80
	<b>\$ 1,089,724.54</b>



## Municipal Excess Liability Joint Insurance Fund

9 Campus Drive – Suite 216  
Parsippany, NJ 07054  
Tel (201) 881-7632  
Fax (201) 881-7633

**Date:** Friday March 22, 2024

**To:** Atlantic County Municipal Joint Insurance Fund

**Subject:** MEL March 2024 Report

**Management Committee:** This committee met on March 18<sup>th</sup> and discussed the following contracts and/or services that were up for renewal:

- § **Fund Treasurer** - Michael Zambito, has submitted his resignation notice as of July 1, 2024. The MEL will recognize and honor Mr. Zambito's years of service to the MEL at its June 10, 2024 meeting. In addition, a replacement candidate will be submitting a proposal for services; more information will be provided at the next meeting.
- § **Joint Cash Management & Investment Program (JCMI) Professionals** – The Board of Fund Commissioners adopted a resolution authorizing award of Professional Service Agreement to Eagle Asset Management for Asset Manager, The Bank of New York for Custodial Services/Accounting and NW Financial Services as Financial Advisor.
- § **Archivist** – The Board of Fund Commissioners adopted a resolution authorizing award of services to PolicyFind for Confidential Insurance Archaeology Services.
- § **Southern New Jersey Marketing Consultant** – This contract is set to expire on May 8<sup>th</sup>; the Fund office in conjunction with the Qualified Purchasing Agent (QPA) issued Request for Proposals (RFP) and received one proposal from PJM Consultants LLC.

**Banking Services Request For Proposals (RFP):** The Joint Cash Management & Investment Program (JCMI) Operating Committee issued an RFP for Banking Services, which was due on January 17<sup>th</sup>. Responses were submitted by Citizens Bank (*incumbent*), Republic Bank and TD Bank. The JCMI Operating Committee reviewed the responses and made a recommendation to the MEL Investment Committee at their March 19<sup>th</sup> meeting; copies of those minutes were submitted for information. The Board of Fund Commissioners adopted a resolution awarding services to TD Bank effective July 1, 2024.

**Emergency Restoration Services Vendors:** The Fund's Qualified Purchasing Agent (QPA) prepared a Request for Qualifications (RFQ) #24-02 for Emergency Restoration Services, which was due on March 6<sup>th</sup>. Via this process, the MEL prequalifies vendors that provide emergency cleanup and restoration services to assist members in securing these services during an emergency. Eleven (11) responses were received and reviewed by the QPA; the QPA's bid summary report was submitted for information and noted all but one (1) vendor was "responsive". The Board of Fund Commissioners approved the list of Emergency Restoration Service vendors. A copy of the responses will be posted to the MEL website for members to access. Confirmed vendors are:

- |                                     |  |
|-------------------------------------|--|
| 1. AllRisk Property Damage Experts  | 7. Nela Carpentry & Masonry                              |
| 2. Belfor Property Restoration      | 8. Rapid Recovery Services LLC                           |
| 3. CPR Restoration and Cleaning LLC | 9. Timeless Restore LLC dba ServiceMaster<br>by Timeless |
| 4. Ferreira Construction Co Inc.    | 10. Vaspro LLC dba SERVPRO                               |
| 5. Montana Construction Corp. Inc   |  |
| 6. National Restoration LLC         |  |

### MEL Committee Reports:

**Safety & Education Committee:** This committee met on February 9, 2024; submitted for information were the minutes of that meeting. Committee is scheduled to meet next on May 3, 2024 at 10:30AM.

**Coverage Committee:** A meeting of this committee will be scheduled during the 2<sup>nd</sup> quarter of 2024.

**Legislative Committee:** This committee last met on February 23, 2024; submitted for information were the minutes of that meeting.

**Claims Committee:** This committee last met on January 8, 2024 and met after today's meeting. Minutes of these meetings are sent to the full MEL Board separately from the agenda.

**MEL Financials:** The preliminary year-end financials indicate the MEL will close out Fund Year 2023 with approximately \$14.3 million in surplus and is not expected to be issuing any additional assessments to the local JIFs.

**Residual Claims Fund (RCF):** Submitted for information was a copy of Commissioner Clarke's report on the RCF 2024 Reorganization meeting.

**Cyber JIF:** Submitted for information was the Cyber JIF report on the 2024 Reorganization meeting. The Cyber JIF met on March 21<sup>st</sup> and will be considering reimbursement to those JIFs that already contracted for cyber security control services at their next meeting.

**2023/2024 Elected Officials Seminar:** The MEL's Annual Elected Officials Seminar was held as part of the League of Municipalities Conference. Credits for attendees have been applied to the billing. The course has now been uploaded into the MEL's Learning Management System. Submitted for information were the directions to access the program.

**2024 MEL, MR HIF & NJCE JIF Educational Seminar:** The 14<sup>th</sup> annual seminar will be conducted virtually on 2 half-day sessions: Friday April 19<sup>th</sup> and Friday April 26<sup>th</sup> from 9AM to 12PM. The seminar qualifies for Continuing Educational Credits including CFO/CMFO, Public Works, Clerks, Insurance Producers and Purchasing Agents. There is no fee for employees, insurance producers, as well as personnel who work for services companies associated with the Municipal Excess Liability Joint Insurance Fund (MEL JIF), Municipal Reinsurance Health Insurance Fund (MR HIF) and New Jersey Counties Excess Joint Insurance Fund (NJCE JIF). A copy of the invitation, along with directions to register was submitted for information.

**MEL Memorandum/Notices to Members:** In early February, the Fund Attorney prepared a memorandum, which addressed "Recent Trends in Billboard Litigation". The memo included some information to assist members in evaluating billboard litigation and existing sign ordinances that may require revisions.

**2024 Financial Disclosures:** JIF Commissioners should anticipate the online filing of the Financial Disclosure forms inclusive of any other municipal related positions that require filing. It is anticipated the Division of Local Government Services will distribute a notice with filing instruction in March with a deadline to file by April 30<sup>th</sup>.

**Retirement Acknowledgement:** Donna Setzer of QualCare, the MEL's Managed Care Organization announced her retirement as of March 31<sup>st</sup> and was acknowledged for her years of service on the MEL account.

**NJ Code of Conduct for Youth Sporting Events:** Fund Attorney summarized a claim arising out of the NJ Code of Conduct for Youth Sporting Events statute. In 2022, the state amended the law to establish guidelines for conduct of behavior by any student, coach, official, parent or other person, which could result in a ban on attending future sport events and includes a remediation process for the banned individual.

**Order of Meetings:** The Board was asked to consider changing the order of meetings, so the MEL meeting occurs first since the RCF and EJIF typically adopt initiatives led by the MEL. In addition, consideration was asked to hold the MEL and RCF claims meetings on separate days than the regular JIF meetings.

**Executive Session:** An executive session was held to discuss a claim matter. Board confirmed authorization given to Fund Attorney to meet with the town, along with one or two members of the board.





## Municipal Excess Liability Residual Claims Fund

9 Campus Drive – Suite 216  
Parsippany, New Jersey 07054  
*Tel (201) 881-7632*  
*Fax (201) 881-7633*

March 22, 2024

Memo to: Atlantic County Municipal Joint Insurance Fund

Re: RCF March Meeting

**2024 Cash Management Plan Amendment:** Resolution 2-24 Establishing the RCF 2024 Fiscal Management Plan, adopted at the RCF January reorganizational meeting, was amended to include an additional claims signatory from Qual-Lynx.

**Crime Bond Renewal:** The Board passed a motion to renew Selective Insurance policy for commercial crime coverage for the Fund's Executive Director, Treasurer and Claims as of 5/1/2024 for a premium of \$1,514.00. The policy was enhanced to include additional coverages for 2024.

**Financial Disclosures:** JIF Fund Commissioners should anticipate the online filing of the Financial Disclosure forms in April.

**Claims Committee:** The Claims Review Committee met on January 8, 2024 and the morning of the Commissioner's meeting.

**Next Meeting:** The next meeting of the RCF is scheduled for June 10, 2024 at 10:30 AM at Forsgate Country Club.



**New Jersey Municipal Environmental  
Risk Management Fund**

9 Campus Drive, Suite 216  
Parsippany, New Jersey 07054  
*Tel (201) 881-7632*  
*Fax (201) 881-7633*

DATE: March 22, 2024  
TO: Atlantic County Municipal Joint Insurance Fund  
SUBJECT: Summary of Topics Discussed at E-JIF Meeting

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**REVISED 2024 BUDGET AND RELATED 2024 PROFESSIONAL FEE AMENDMENTS:**

The EJIF 2024 budget that was adopted at the January 8, 2024 meeting was been revised to reflect a new member, Willingboro MUA, who joined February 1, 2024. The change is .05% and does not need to be filed with the state. The change in membership slightly changed the professional fees for Fund Attorney, Executive Director, Underwriting Managers, Environmental Services and Claims Administrator. A motion was passed to adopt the amended budget and approve the changes for the mentioned Fund professionals. A motion was passed to adopt the amended budget and approve the changes for the mentioned Fund professionals.

**BANKING SERVICES REQUEST FOR PROPOSALS (RFP):** The MEL's Joint Cash & Management Investment Program (JCMI) oversaw the release of an RFP for banking services and later this morning the MEL will discuss the appointment. At our next meeting in June the EJIF will discuss the outcome of the MEL's decision and decide if the Fund will follow the MEL's lead. No action was taken at the March meeting.

**FINANCIAL DISCLOSURES:** JIF Commissioners should anticipate the online filing notice of the Financial Disclosure forms inclusive of any other municipal related positions that require filing before the deadline of April 30<sup>th</sup>.

**NEXT MEETING -** The next meeting of the EJIF is scheduled for Monday June 10, 2024 at Forsgate Country Club, Monroe Twp, N.J



## NEW JERSEY CYBER RISK MANAGEMENT FUND

9 Campus Drive – Suite 216  
Parsippany, NJ 07054  
Tel 201.881.7632

**Date:** March 21, 2024

**To:** Atlantic County Municipal Joint Insurance Fund

**Banking Services:** The Cyber JIF will review the MEL’s decision to appoint a new banking services provider and consider if they will follow the MEL’s lead.

**Cyber Security Framework:** Using feedback and questions received from the membership over the past year, the Underwriting Manager made updates to the Cyber Security Framework to better assist members in obtaining Basic, Intermediate or Advanced cyber compliance. Members are encouraged to continue sharing their feedback. The Underwriting Manager’s office notified Fund Commissioners and Risk Management Consultants that the updates have been posted on the Cyber JIF website in the Secure Documents section for members only.

**Cyber Website:** The Cyber JIF website has had an increase in activity and member login requests has increased as well. Login requests are vetted through each JIF’s Executive Director’s office.

**Cyber Controls:** D2 Cybersecurity, the JIF’s vendor for cyber training, phishing and vulnerability scanning, began launching their training program to registered members in February. Deadline to complete the training is June 30, 2024.

**Cyber Best Banking Practice Reference:** The following wording was shared for members wishing to update their cash management plan to meet the MEL’s JCMI requirement. This language ensures that should the JCMI make any changes, that every municipality does not have to amend their plans, it is automatically incorporated: “The Township will follow the MEL’s JCMI Banking Best Practices governing Wire Transfers, ACH Payments and Check Issuance. The Finance Office will further confirm that its financial institutions adhere to these requirements.”

**JIF Reimbursements:** A motion was passed to consider reimbursement for JIF’s that already have contracted cyber control services, and a resolution will be presented next month.

**Timing of Collecting Deductibles:** XL, the excess carrier, bills the Cyber JIF as it makes payments until its deductible is met. The Board passed a motion to bill back the deductible to the member on a quarterly basis until the deductible is exhausted rather than at the close of the claim.

**Financial Disclosures:** The New Jersey Department of Community Affairs will soon open their website for financial disclosures. The Fund office will notify Fund Commissioners and the deadline to complete filing is April 30<sup>th</sup>.

**Next Meeting Date:** Thursday, May 16, 2024 at 3:30 PM via video / audio teleconference.

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND  
RESOLUTION #2024-\_\_\_**

**RESOLUTION AUTHORIZING THE RELEASE OF FUND YEAR 2022 CLOSED SESSION  
EXECUTIVE COMMITTEE MEETING MINUTES AS RECOMMENDED BY THE FUND  
SOLICITOR**

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund has been organized pursuant to *N.J.S.A. 40A:10-36 et. seq.*; and

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund is subject to the provisions of NJSA 10:4-6 the “Open Public Meetings Act”; and

**WHEREAS**, in 2022, the Executive Committee, during regularly scheduled meetings of the Fund, deemed it necessary to enter into a closed session to discuss matters affecting the safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations as authorized by NJSA10:4-12; and

**WHEREAS**, in accordance with NJSA10:4-14 minutes of these closed sessions were transcribed by the Fund Recording Secretary and approved by the Executive Committee; and

**WHEREAS**, in correspondence dated February 15, 2024 the Fund Recording Secretary requested that the Fund Solicitor review the closed session meeting minutes from Fund Year 2022 to make a determination as to whether any of these minutes could be released to the public; and

**WHEREAS**, in correspondence dated March 29, 2024, a copy of which is attached hereto and incorporated herein by reference, the Fund Solicitor advised the Executive Director’s Office that the Closed Session Minutes from the 2022 Executive Committee Meetings can be released to the public in their entirety, except for the following specific sections of these minutes, as the matters discussed are still unresolved;

1. In the May 18, 2022 minutes, the discussion on page 2 entitled “Recreational Marijuana and Employee Testing” should be redacted.
2. In the June 15, 2022 minutes, the discussion on page 2 entitled “Beaches” should be redacted.
3. In the September 21, 2022 minutes, the discussion on page 2 entitled “Police Civil Rights Cases” should be redacted.
4. In the December 21, 2022 minutes, the discussion on page 2 entitled “Wildwood Boardwalk” should be redacted.

**NOW THEREFORE BE IT RESOLVED**, by the Commissioners of the Atlantic County Municipal Joint Insurance Fund that the Closed Session Minutes from the 2022 Executive Committee Meetings can be released to the public in their entirety, except for the following specific sections of these minutes, as the matters discussed are still unresolved;

1. In the May 18, 2022 minutes, the discussion on page 2 entitled “Recreational Marijuana and Employee Testing” should be redacted.
2. In the June 15, 2022 minutes, the discussion on page 2 entitled “Beaches” should be redacted.
3. In the September 21, 2022 minutes, the discussion on page 2 entitled “Police Civil Rights Cases” should be redacted.
4. In the December 21, 2022 minutes, the discussion on page 2 entitled “Wildwood Boardwalk” should be redacted.

**BE IT FURTHER RESOLVED** that a copy of this Resolution be forwarded to the Fund Recording Secretary and Executive Director for their knowledge and action as required.

This Resolution was duly adopted by the Atlantic County Municipal Joint Insurance Fund at a public meeting held on April 17, 2024.

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

Attest: \_\_\_\_\_  
Secretary

By: \_\_\_\_\_  
Chairperson



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March 29, 2024

Paul A. Forlenza, Executive Director, ACMJIF  
**ARTHUR J. GALLAGHER**  
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6000 Sagemore Drive, Suite 6203  
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[via [paul\\_forlenza@riskprogramadministrators.com](mailto:paul_forlenza@riskprogramadministrators.com)]

**RE: ACMJIF 2022 Closed Session Meeting Minutes**

Dear Paul:

Please be advised that I have reviewed the previous redactions from the Closed Session Meeting Minutes from the Fund Year 2022 (January through December) and based upon my review of those redactions, the redactions to the 2022 minutes should remain redacted.

If you have any questions or need for additional information, please do not hesitate to contact me.

Very truly yours,  
**THE DEWEESE LAW FIRM, P.C.**

David S. DeWeese

DSD/b

cc: Tracy Forlenza, Recording Secretary, ACMJIF  
Kris Kristie, Sr. Account Representative, Risk Program Administrators  
Kamini Patel, MBA, CIC, CPCU, Pooling Administrator  
Chris Roselli, Acct. Mgt., Qual-Lynx  
Elizabeth Woods, ACMJIF Fund Chair

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND  
RESOLUTION #2024-\_\_\_**

**RESOLUTION AUTHORIZING THE RELEASE OF FUND YEAR 2023 CLOSED SESSION  
EXECUTIVE COMMITTEE MEETING MINUTES AS RECOMMENDED BY THE FUND  
SOLICITOR**

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund has been organized pursuant to *N.J.S.A. 40A:10-36 et. seq.*; and

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund is duly constituted as a Municipal Self Insurance Fund to provide insurance coverage to its member municipalities; and

**WHEREAS**, the Atlantic County Municipal Joint Insurance Fund is subject to the provisions of NJSA 10:4-6 the “Open Public Meetings Act”; and

**WHEREAS**, in 2023, the Executive Committee, during regularly scheduled meetings of the Fund, deemed it necessary to enter into a closed session to discuss matters affecting the safety and property of the public and to discuss pending or anticipated litigation and/or contract negotiations as authorized by NJSA10:4-12; and

**WHEREAS**, in accordance with NJSA10:4-14 minutes of these closed sessions were transcribed by the Fund Recording Secretary and approved by the Executive Committee; and

**WHEREAS**, in correspondence dated February 15, 2024 the Fund Recording Secretary requested that the Fund Solicitor review the closed session meeting minutes from Fund Year 2023 to make a determination as to whether any of these minutes could be released to the public; and

**WHEREAS**, in correspondence dated March 29, 2024, a copy of which is attached hereto and incorporated herein by reference, the Fund Solicitor advised the Executive Director’s Office that the Closed Session Minutes from the 2023 Executive Committee Meetings can be released to the public in their entirety;

**NOW THEREFORE BE IT RESOLVED**, by the Commissioners of the Atlantic County Municipal Joint Insurance Fund that the Closed Session Minutes from the 2023 Executive Committee Meetings can be released to the public in their entirety;

**BE IT FURTHER RESOLVED** that a copy of this Resolution by forwarded to the Fund Recording Secretary and Executive Director for their knowledge and action as required.

This Resolution was duly adopted by the Atlantic County Municipal Joint Insurance Fund at a public meeting held on April 17, 2024.

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

Attest: \_\_\_\_\_  
Secretary

By: \_\_\_\_\_  
Chairperson



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March 29, 2024

Paul A. Forlenza, Executive Director, ACMJIF  
**ARTHUR J. GALLAGHER**  
**RISK MGT. SERVICES, INC.**  
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6000 Sagemore Drive, Suite 6203  
Marlton, New Jersey 08053

[via [paul\\_forlenza@riskprogramadministrators.com](mailto:paul_forlenza@riskprogramadministrators.com)]

**RE: ACMJIF 2023 Closed Session Meeting Minutes**

Dear Paul:

Please be advised that I have reviewed the Closed Session Meeting Minutes from the Fund Year 2023 (January through December), and based upon my review of those minutes, the minutes can be released in their entirety.

If you have any questions or need for additional information, please do not hesitate to contact me.

Very truly yours,  
THE DEWEESE LAW FIRM, P.C.

David S. DeWeese

DSD/b

cc: Tracy Forlenza, Recording Secretary, ACMJIF  
Kris Kristie, Sr. Account Representative, Risk Program Administrators  
Kamini Patel, MBA, CIC, CPCU, Pooling Administrator  
Chris Roselli, Acct. Mgt., Qual-Lynx  
Elizabeth Woods, ACMJIF Fund Chair



**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

**RESOLUTION 2024-**

**APPOINTING JAMES PACANOWSKI, II AS THE FUND’S REPRESENTATIVE TO THE MUNICIPAL EXCESS LIABILITY JOINT INSURANCE FUND, THE RESIDUAL CLAIMS JOINT INSURANCE FUND, AND THE ENVIRONMENTAL RISK MANAGEMENT JOINT INSURANCE FUND FOR THE 2024 FUND YEAR**

**Whereas**, the Atlantic County Municipal Joint Insurance Fund has been organized pursuant to NJSA 40A:10-36, et seq.; and

**Whereas**, the Atlantic County Municipal Joint Insurance Fund is a member of the Municipal Excess Liability Joint Insurance Fund, the Residual Claims Joint Insurance Fund, and the Environmental Risk Management Fund; and

**Whereas**, as a member of each of these Funds, the Atlantic County Municipal Joint Insurance Fund actively participates in the meetings and operations of each of these Funds through the appointment of a representative to each Fund; and

**Whereas**, the appointment of the representative to each of these Fund’s is at the discretion of the Chair of the Atlantic County Municipal Joint Insurance Fund; and

**Whereas**, James Pacanowski, Fund Commissioner from the City of Ventnor, has stated that he will serve as the Atlantic County Municipal Joint Insurance Fund’s representative to the Municipal Excess Liability Joint Insurance Fund, the Residual Claims Joint Insurance Fund, and the Environmental Risk Management Joint Insurance Fund during the remainder of the 2024 Fund Year; and

**Whereas**, the Fund Chair has determined that it is in the best interest of the Atlantic County Municipal Joint Insurance Fund to appoint James Pacanowski as the Fund’s representative to the Municipal Excess Liability Joint Insurance Fund, the Residual Claims Joint Insurance Fund, and the Environmental Risk Management Joint Insurance Fund for the remainder of the 2024 Fund Year.

**Now, therefore, be it resolved by the Fund Commissioners of the Atlantic County Municipal Joint Insurance Fund** that James Pacanowski, Fund Commissioner from the City of Ventnor, is hereby appointed as the Atlantic County Municipal Joint Insurance Fund’s representative to the Municipal Excess Liability Joint Insurance Fund, the Residual Claims Joint Insurance Fund, and the Environmental Risk Management Joint Insurance Fund for the remainder of the 2024 Fund Year; and

**Be it Further Resolved** that these appointments shall be effective April 18, 2024; and

**Be it Further Resolved** that a fully executed copy of this resolution be forwarded to the Municipal Excess Liability Joint Insurance Fund, the Residual Claims Joint Insurance Fund, and the Environmental Risk Management Joint Insurance Fund.

This resolution was duly adopted by the Atlantic County Municipal Joint Insurance Fund at a public meeting held on April 17, 2024.

**ATLANTIC COUNTY MUNICIPAL JOINT INSURANCE FUND**

By: \_\_\_\_\_  
CHAIRPERSON

Attest: \_\_\_\_\_  
SECRETARY

Date: \_\_\_\_\_