



753 West Boulevard
Chipley, Florida 32428
Phone: (850) 638-6131
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Panhandle Area Educational Consortium
Risk Management

Patrick L. McDaniel, Executive Director

Date: _____

MEMORANDUM

TO: Mary Ashley Fax: 813-207-5121

FROM: Tony Ganstine, Safety Specialist

RE: **Request for Certificate of Insurance 2011-2012**

Please issue a Certificate of Insurance to:

NAME: _____

ADDRESS: _____

NATURE OF DISTRICT ACTIVITY (please include dates if applicable)

Certificate of insurance for:

Check if applicable:

Loss Payee Additional Insured Mortgage Special Requirements

(Please describe contract, lease agreement, location no. and building no. where property is located or address, description of property including value, serial number or vehicle identification number.)

ADDITIONAL INFORMATION: Please fax to: _____

DISTRICT: _____ County CONTACT: _____

SUBMITTED BY: Frances Rogers

Please e-mail copies to: rogersf@paec.org