

## WARREN COUNTY BOARD OF EDUCATION CONTRACT FOR SPEECH SERVICES

This contract for SPEECH services (the "Contract") is made and entered into this 13<sup>th</sup> day of June , 2023 between the Warren County Board of Education (the "School System"), 109 Cousin Lucy's Lane, Warrenton NC 27589, and Christine Saunders, 605 St. Catherine's Drive, Wake Forest, NC 27587.

For and in consideration of the mutual promises set forth in the Contract the parties do mutually agree as follows:

1. Obligations of Provider. Provider hereby agrees to provide services to the School System as follows:
  - 1.1 Based on the school assignment, qualified service provider will report to work on the first Mandatory Workday of the assigned school(s) as indicated on the school WCS Academic Calendar. Copy of Warren County School's calendar enclosed for reference. Work will be completed in a timely manner acceptable to the School System in full compliance with the terms and conditions of this Contract, including any documents incorporated by reference.
  - 1.2 Service Provider will not bill for any days past the last workday-mandatory day for staff as indicated on the WCS Calendar (unless extended employment has been offered).
  - 1.3 Service Provider will attend professional development presented by Warren County Schools Exceptional Children Department (refer to school calendar for dates) and Speech Department Meetings (dates will be e-mailed).
  - 1.4 Qualified Provider must attend a Medicaid Billing Training as deemed necessary by the Director of Exceptional Children Programs at designated time and location.
  - 1.5 Medicaid Billing is part of expectations and is to be submitted monthly or sooner. Submitting at a time other than this is a violation of this contract.
  - 1.6 Qualified Service Provider is to provide services/assessments/evaluations to the eligible students of the Warren County School System in response to a request from the Director of Exceptional Children Programs or other designated Warren County School personnel. Services will be provided in designated school sites and/or community settings. If a child on your case load is placed on homebound or alternative setting (ALP), you are still obligated to implement the current IEP by providing services to the child based on the professional judgment of the service provider and Director of Exceptional Children Programs.
  - 1.7 Qualified Service Providers will maintain up-to-date NC SLP licensure which may be funded through PRC 118 state funds (pending funding availability).
  - 1.8 Qualified Service Providers will not be paid for billing after 4 pm unless prior approval has been given.
  - 1.9 Qualified Service Providers are not to bill the EC Department for taking on extra duties such as, but not limited to, teaching instructional classes, coaching sports, attending socials, etc. If required to do so, this request will be reported to the EC Director or EC Administrative Assistant by the end of the work day.
  - 1.10 Qualified Service Providers will adhere to established due dates for annual reviews, reevaluations, reports of progress, documentation of services required for Medicaid billing, roster corrections, and other due dates that are established by the Warren County School District.
  - 1.11 Verification of Service Records are required by the DPI Monitoring Division and are due in the Warren County Schools Exceptional Children's Office by the end of the day on Wednesday for services provided the previous week. It is the responsibility of the Service Provider to have services verified by

obtaining signatures of the building administrator. The dates on the aforementioned form must agree with monthly invoices.

- 1.12 For each school visit, it is the expectations to sign in and sign out at the front office of each school using their designated method (computer, log book, etc. ).
- 1.13 FINAL INVOICES for school year MUST be in the Warren County Schools Exceptional Children's Office by 12 noon, May 31, 2024 to provide BOARD and finance with a timely and detailed invoice of services.
- 1.14 Records Maintenance. Provider shall maintain written documentation of any service provided, including any required documentation meeting the requirements of applicable federal, state and local laws and regulations.

## 2. Obligations of the School System.

- 2.1 The School System hereby agrees to compensate Provider at a rate or in the amount of \$68.00 per hour once all services for services rendered, with total payments not to exceed \$95,000. With the School System's written consent, payments may be made in monthly installments for work performed and accepted during the previous month.
  - 2.2 In the event of inclement weather, fire, power failure, or other similar occurrence, which may necessitate the cancellation of the delivery of the service(s), and an alternate date cannot be agreed upon, the School System will be under no obligation to compensate Provider for services not rendered.
3. Term. The services described in the Contract will be provided from July 1, 2023 through June 30, 2024 unless sooner terminated as herein provided.
  4. Compensation. The School System hereby agrees to compensate Provider in the amount of \$68.00 per hour once all services have been rendered in accordance with the terms of this Contract. Provider shall provide School System with invoice(s) itemized by service provided the number of hours worked and by whom, the date(s) that services were provided, and the amount owed, along with any supporting documentation that may be requested in advance by School System. The School System shall process payments to Provider within fifteen (15) days of submission of such invoice(s). In the event of inclement weather, fire, power failure, or other similar occurrence, which may necessitate the cancellation of the delivery of the service(s), and an alternate date cannot be agreed upon, the School System will be under no obligation to compensate Provider for services not rendered.
  5. Termination for Convenience. The School System may terminate this Contract at any time at its complete discretion upon twenty (20) calendar days' notice in writing from the School System to Provider prior to the date of termination. In addition, all finished or unfinished documents and other materials produced by Provider pursuant to this Contract shall, at the request of the School System be turned over to it and become its property. If the Contract is terminated by the School System in accordance with this section, the School System will pay Provider at the rate set out in Section 2.1 for all services performed as of the date of termination.
  6. Termination for Default. At any time, the School System may terminate this Contract immediately and without prior notice if provider is unable to meet goals and timetables or if the School System is dissatisfied with the quality of services provided.
  7. Terms and Methods of Payment. Provider shall submit to the School System monthly invoices itemized by service provided, the number of hours worked and by whom, the date(s) that services were provided,

and the amount owed, along with any supporting documentation that may be requested in advance by the School System. Such invoices shall be submitted within thirty (30) days of the rendering of services. The School System shall process payments to Provider within fifteen (15) days of submission of such invoices. Invoices should be sent to Shana Brown, 109 Cousin Lucy's Lane, Warrenton, NC 27589 for review and approval.

8. Contract Funding. It is understood and agreed between Provider and the School System that the School System's payment obligation under this Contract is contingent upon the availability of appropriated funds from which payment for Contract purposes can be made.
9. Insurance. Provider agrees to maintain Commercial General Liability in amount of \$1,000,000 each occurrence, \$1,000,000 each occurrence in Personal & Advertising Injury with \$2,000,000 General Aggregate, and \$2,000,000 Products/Completed Operations Aggregate. ~~Provider shall maintain \$1,000,000 in automobile liability, and other appropriate insurance, as well as Workers Compensation in the required statutory amount for all employees participating in the provision of services under this Contract. Provider also agrees to maintain \$1,000,000 in professional liability insurance if the Provider is engaged in a professional service pursuant to this Contract. The Board of Education shall be named by endorsement as an additional insured on the General and Automobile Liability policies. Certificates of such insurance shall be furnished by Provider to the School System and shall contain an endorsement to provide the School System at least 10 days' written notice of any intent to cancel or terminate by either Provider or the insuring company. Failure to furnish insurance certificates or maintain such insurance shall be a default under this contract and shall be grounds for immediate termination of this Contract.~~
10. Taxes. Provider shall pay all federal, state, and FICA taxes for all employees participating in the provision of services under this Contract. If requested by the School System, Provider shall provide a breakdown of all sales and use taxes paid on labor, materials, parts and/or supplies.
11. Monitoring and Auditing. Provider shall cooperate with the School System, or with any other person or agency as directed by the School System, in monitoring, auditing, or investigating activities related to this Contract. Provider shall permit the School System to evaluate all activities conducted under this contract as dictated by the School System. Provider shall provide auditors retained by the School System with access to any records and files related to the provision of services under this Contract. The School System agrees that its auditors will maintain the confidentiality of any identified and actual trade secrets of Provider accessed during an audit conducted under this Contract.
12. Confidentiality of Student Information. Provider agrees that all student records or personally identifiable information contained in student records that may be obtained in the course of providing services to the School System under this contract shall be subject to the confidentiality and disclosure provisions of applicable federal and state statutes and regulations as well as the School System's policies. All student records shall be kept in a secure location preventing access by unauthorized individuals. Provider will maintain an access log delineating date, time, agency, and identity of individual accessing student records who is not in the direct employ of Provider. Provider shall not forward to any person other than parent or the School System any student record or personally identifiable information obtained from a student record (including, but not limited to, the student's identity) without the written consent of the School System. Upon termination of this Contract, Provider shall turn over to the School System all student records or personally identifiable information about students obtained by Provider while providing services under this Contract. Nothing in this Contract gives Provider any right to access any student records or personally identifiable information.
13. Lunsford Act. Provider also acknowledges that G.S. § 14-208.18 prohibits anyone required to register

as a sex offender under Article 27A of Chapter 14 of the General Statutes from knowingly being on the premises of any school. Provider shall conduct or arrange to have conducted, at its own expense, sexual offender registry checks on each of its owners, employees, agents, subcontractors and independent contractors ("Contractual Personnel") who will engage in any service on or delivery of goods to School System property or at a School System sponsored event, except checks shall not be required for individuals who are solely delivering or picking up equipment, materials, or supplies at: (1) the administrative office or loading dock of a school; (2) non-school sites; (3) schools closed for renovation; or (4) school construction sites. The checks shall include at a minimum checks of the State Sex Offender and Public Protection Registration Program, the State Sexually Violent Predator Registration Program, and the National Sex Offender Registry ("the Registries"). For Provider's convenience only, all of the required registry checks may be completed at no cost by accessing the United States Department of Justice Sex Offender Public Website at <http://www.nsopw.gov/>. Provider shall provide certification on the Sexual Offender Registry Check Certification Form (Exhibit B) that the registry checks were conducted on each of its Contractual Personnel providing services or delivering goods under this Contract prior to the commencement of such services or the delivery of such goods. Provider shall conduct a current initial check of the registries. The sex offender registry checks shall be conducted within 30 days of Provider's execution of the Contract and prior to performing any services on School System property. In addition, Provider agrees to conduct the registry checks and provide a supplemental certification form before any additional Contractual Personnel are used to deliver goods or provide services pursuant to this Contract. Provider further agrees to conduct annual registry checks of all Contractual Personnel and provide annual certifications at each anniversary date of this Contract. Provider shall not assign any individual to deliver goods or provide services pursuant to this Contract if said individual appears on any of the listed registries. Provider agrees that it will maintain all records and documents necessary to demonstrate that it has conducted a thorough check of the registries as to each Contractual Personnel, and agrees to provide such records and documents to the School System upon request. Provider specifically acknowledges that the School System retains the right to audit these records to ensure compliance with this section at any time in the School System's sole discretion. Failure to comply with the terms of this provision shall be deemed a material breach of the Contract.

14. Criminal Background Checks. Provider shall conduct criminal record and background checks on all Contractual Personnel who will perform services pursuant to this Contract on School System property or at School System events. The criminal background checks shall be conducted within 30 days of Provider's execution of the Contract and prior to performing any services on School System property. Provider shall provide the results of said checks to School System within five (5) business days of receipt and shall not assign any Contractual Personnel to provide services under the Contract if said worker has been convicted of or pled nolo contendere to (1) any felony; (2) any crime, whether misdemeanor or felony, involving violence, illegal drugs, theft, child abuse, sexual harassment, sexual abuse, or personal impropriety of a sexual nature with regard to any other person; or (3) any other crime or conduct reasonably indicating that the Contractual Personnel poses a threat to the safety or well-being of School System's students, personnel, or property. In addition, Provider shall obtain all authorizations necessary for School System to conduct additional criminal record and background checks at its sole expense at any time during the term of this Contract. If School System chooses to exercise this right, Provider shall, within five (5) business days of School System's request, provide the full name, date of birth, and state of residency for the past ten years for all Contractual Personnel providing services under the Contract, along with any other information reasonably requested by School System for purposes of performing criminal record and background checks. Without modifying or waiving any of Provider's obligations under this provision, School System reserves the right to prohibit any Contractual Personnel from providing services under this Contract if the School System determines, in its sole discretion, that said Contractual Personnel has not undergone a criminal record and background check in accordance with this provision or if the results of such criminal record and background check reasonably indicate that the said Contractual Personnel may pose a threat to the safety

or well-being of students, school personnel, or others.

15. **Indemnification.** Provider shall indemnify and hold harmless the School System and its agents and employees from and against all claims, actions, demands, costs, damages, losses, and/or expenses of any kind whatsoever proximately resulting from the omission or commission of any act, lawful or unlawful, by Provider or its agents and/or employees, including but not limited to court costs and attorney's fees, incurred in connection with the defense of said matters. The parties agree that this indemnification clause is an "evidence of indebtedness" for purpose of N. C. Gen. Stat. § 6-21.2.
16. **Relationship of Parties.** Provider shall be an independent contractor of the School System, and nothing herein shall be construed as creating a partnership or joint venture; nor shall any employee of Provider be construed as an employee, agent, or principal of the School System.
17. **Compliance with Applicable Laws.** Provider shall comply with all applicable laws and regulations in providing services under this Contract. In particular, Provider shall not employ any individuals to provide services to the School System who are not authorized by federal law to work in the United States. Provider represents and warrants that it is aware of and in compliance with the Immigration Reform and Control Act and North Carolina law (Article 2 of Chapter 64 of the North Carolina General Statutes) requiring use of the E-Verify system for employers who employ twenty-five (25) or more employees and that it is and will remain in compliance with these laws at all times while providing services pursuant to this Contract. Provider shall also ensure that any of its subcontractors (of any tier) will remain in compliance with these laws at all times while providing subcontracted services in connection with this Contract. Provider is responsible for providing affordable health care coverage to all of its full-time employees providing services to the School System. The definitions of "affordable coverage" and "full-time employee" are governed by the Affordable Care Act and accompanying IRS and Treasury Department regulations.
18. **Restricted Companies List.** Provider represents that as of the date of this Contract, Provider is not included on the Final Divestment List created by the North Carolina State Treasurer pursuant to N.C. Gen. Stat. § 147-86.58. Provider also represents that as of the date of this Contract, Provider is not included on the list of restricted companies determined to be engaged in a boycott of Israel created by the North Carolina State Treasurer pursuant to N.C. Gen. Stat. § 147-86.81.
19. **Anti-Nepotism.** Provider warrants that, to the best of its knowledge and in the exercise of due diligence, none of its corporate officers, directors, or trustees and none of its employees who will directly provide services under this Contract are immediate family members of any member of the Warren County Board of Education or of any principal or central office staff administrator employed by the School System. For purposes of this provision, "immediate family" means spouse, parent, child, brother, sister, grandparent, or grandchild, and includes step, half, and in-law relationships. Should Provider become aware of any family relationship covered by this provision or should such a family relationship arise at any time during the term of this Contract, Provider shall immediately disclose the family relationship in writing to the Superintendent of Schools. Unless formally waived by the School System, the existence of a family relationship covered by this Contract is grounds for immediate termination by School System without further financial liability to Provider.
20. **Applicable School Board of Education Policies.** Provider acknowledges that the Warren County Board of Education has adopted policies governing conduct on School System property and agrees to abide by any and all relevant Board policies while on School System property. The Provider acknowledges that Board's policies are available on the School System's website.
21. **Assignment.** Provider shall not assign, subcontract, or otherwise transfer any interest in this contract without the prior written approval of the School System.
22. **Contract Modifications.** This contract may be amended only by written amendments duly executed by and between the School System and Provider.

23. **North Carolina Law.** North Carolina law will govern the interpretation and construction of the Contract.
24. **Order of Precedence.** The Parties do hereby agree that in the event of conflict between the terms and conditions of this Contract and the terms and conditions in an agreement entered into between the parties at the same time as or prior to this Contract, the terms and conditions of this Contract shall prevail.
25. **Entire Agreement.** This Contract, including the purchase order, if any, used in connection herewith and any other document(s) expressly incorporated by reference as a part of this Contract, constitutes and expresses the entire agreement and understanding between the parties concerning its subject matter. This Contract supersedes all prior and contemporaneous discussions, promises, representations, agreements and understandings relative to the subject matter of this contract. To the extent there may be any conflict between the four corners of this Contract and other documents incorporated by reference herein, the terms of this Contract will control.
26. **Attached Exhibits:** The following documents, if any, are attached as Exhibits to this Contract and incorporated by reference herein:
  - Exhibit A: Christine Saunders –Liability Insurance
  - Exhibit B: Sexual Registry Check Certification Form
  - Exhibit C: Christine Saunders - License
27. **Severability.** If any provision of this Contract shall be declared invalid or unenforceable, the remainder of the Contract shall continue in full force and effect.
28. **Counterparts and Execution.** This Contract may be executed in any number of counterparts, each of which will be deemed an original but all of which together will constitute one and the same instrument. The Parties agree that computer scanned and/or faxed signatures or copies of this Contract will have the same validity and force as an “original.”
29. **Authority to Enter Contract.** The person(s) executing this Contract on behalf of Provider have authority to do so as an official, binding act of Provider.

IN WITNESS WHEREOF, the parties have hereunto set their hands and seals the day and year first indicated above.

**WARREN COUNTY BOARD OF EDUCATION**

**PROVIDER**

*Victoria Lehman*

Board Chair

*Clemente H. Anderson* CS  
Authorized Signature

ATTEST:

*Keith Sutton*  
Superintendent

This instrument has been pre-audited in the manner required by the School Budget and Fiscal Control Act.

*Donna Roberston*

8/25/2023 | 8:35 AM PDT

School System Finance Officer

Date

Client # 056566

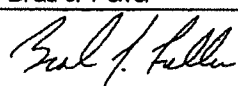
| <b>MEMORANDUM OF INSURANCE</b>   |                    |                |  | Date Issued 07/25/2023      |             |
|--|--------------------|----------------|--|-----------------------------|-------------|
| <b>Producer</b><br><br>Association Member Benefits Advisors, LLC.<br>In CA dba Assn. Member Benefits & Insurance Agency<br>P.O. Box 14576<br>Des Moines, IA 50306-3576<br>1-800-375-2764   |                    |                | This memorandum is issued as a matter of information only and confers no rights upon the holder. This memorandum does not amend, extend or alter the coverages afforded by the Certificate listed below.   |                             |             |
| <b>Insured</b><br><br>CHRISTINE HRANI SAUNDERS<br>605 SAINT CATHERINES DRIVE<br>WAKE FOREST, NC 27587-6645   |                    |                | <b>Company Affording Coverage</b><br>Liberty Insurance Underwriters Inc.   |                             |             |
| This is to certify that the Certificate listed below has been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term or condition of any contract or other document with respect to which this memorandum may be issued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions of such Certificate. The limits shown may have been reduced by paid claims.<br>The Memorandum of Insurance and verification of payment are your evidence of coverage. No coverage is afforded unless the premium is successfully paid in full. |                    |                |  |                             |             |
| Type of Insurance  | Certificate Number | Effective Date | Expiration Date  | Limits                      |             |
| Professional Liability<br>SpeechLangH SE<br>Speech Language Pathologist  | AHY-632553012      | 08/01/2023     | 08/01/2024   | Per Incident/<br>Occurrence | \$1,000,000 |
|  |                    |                |  | Annual Aggregate            | \$3,000,000 |
|  |                    |                |  |                             |             |
| <b>PROOF OF INSURANCE</b>  |                    |                |  |                             |             |
| Memorandum Holder:<br><br><b>PROOF OF COVERAGE ONLY</b>  |                    |                | Should the above describe Certificate be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. |                             |             |
|  |                    |                | Authorized Representative<br>Brad J. Feller  |                             |             |
|  |                    |                |    |                             |             |



Exhibit B

Sexual Offender Registry Check Certification Form

PLEASE SUBMIT THIS FORM TO YOUR SCHOOL SYSTEM'S REPRESENTATIVE

Project Name: Christine Saunders Contract: Christine Saunders

Check the appropriate box to indicate the type of check:

Initial  Supplemental  Annual

1. Christine Saunders (insert name), Speech Language Pathologist (insert title) of \_\_\_\_\_ (insert company name) hereby certify that I have performed all of the required sexual offender registry checks required under this Contract for all Contractual Personnel (employees, agents, ownership personnel, or contractors ) who may be used to deliver goods or provide services under this Contract, including the North Carolina Sex Offender and Public Protection Registration Program, the North Carolina Sexually Violent Predator Registration Program, and the National Sex Offender Registry (Note: all of the required registry checks may be completed at no cost by accessing the United States Department of Justice Sex Offender Public Website at <http://www.nsopw.gov>). I further certify that none of the individuals listed below appears on any of the above-named registries and that I will not assign any individual to deliver goods or perform services under this Contract if said individual appears on any of the sex offender registries. I agree to maintain all records and documents associated with these registry checks, and that I will provide such records and documents to the school system upon request. I specifically acknowledge that the school system retains the right to audit these records to ensure compliance with this section at any time in the school system's sole discretion. I acknowledge that I am required to perform these checks and provide this certification form before any work is performed under the Contract (initial check), any time additional Contractual Personnel may perform work under the Contract (supplemental check), and at each anniversary date of the Contract (annual check).

Contractual Personnel Names

Job Title

- |    |                           |                                    |
|----|---------------------------|------------------------------------|
| 1. | <u>Christine Saunders</u> | <u>Speech Language Pathologist</u> |
| 2. | _____                     | _____                              |
| 3. | _____                     | _____                              |
| 4. | _____                     | _____                              |
| 5. | _____                     | _____                              |
| 6. | _____                     | _____                              |

I attest that the forgoing information is true and accurate to the best of my knowledge.

Christine Saunders (print name)

Christine Saunders 6/1/23 (signature / date)



THE UNITED STATES  
DEPARTMENT *of* JUSTICE

**SMART** Office of Sex Offender Sentencing, Monitoring,  
Apprehending, Registering, and Tracking

# DRU SJODIN NATIONAL SEX OFFENDER PUBLIC WEBSITE

## NATIONAL SEX OFFENDER SEARCH

0 records from *North Carolina (27587)* for City begins with *Wake Forest*, County begins with *Wake*, First Name begins with *Christine*, Last Name begins with *Saunders* that were available at the time your search was performed.

Search performed 6/1/2023 9:36 AM EDT



NC DEPARTMENT OF  
HEALTH AND  
HUMAN SERVICES  
Division of Child Development and Early  
Education

ROY COOPER • Governor  
KODY H. KINSLEY • Secretary  
ARIEL FORD • Director

February 21, 2022

CHRISTINE SAUNDERS  
605 ST CATHERINES DRIVE  
WAKE FOREST NC 27587

**QUALIFICATION EXPIRES: February 21, 2025**

RE: Applicant's Name: **CHRISTINE SAUNDERS**

DOB: **March 15, 1966**

Based on a review of your criminal history, the Division has determined that:

**You are QUALIFIED under the North Carolina Child Care Act, N.C.G.S. § 110-90.2.**

Qualification under child care law only refers to criminal background check requirements.

This qualification letter expires three (3) years from date of issuance, unless you are subsequently disqualified. If you are subsequently disqualified, this letter becomes invalid.

This qualification letter is valid at any licensed or regulated child care facility in North Carolina. If you change employment during the three (3) years the letter is valid, please submit a Change of Information Form to the Department of Health and Human Services Criminal Background Check (DHHS CBC) Unit.

Any arrests, charges, indictments or convictions during the time this letter is valid must immediately be reported to the DHHS CBC Unit at [DHHS.CBC.Unit@dhhs.nc.gov](mailto:DHHS.CBC.Unit@dhhs.nc.gov) or (919)814-6401.

You must renew your criminal background check (CBC) qualification in advance of the expiration. If your CBC qualification expires, you may not work in child care.

If you wish to obtain the information DHHS received from the State Bureau of Investigation (SBI) and/or the Federal Bureau of Investigation (FBI), regarding your criminal history, please contact the SBI directly at (919)582-8660 or the FBI directly at (304)625-5590.

If you have any questions, please feel free to contact the DHHS CBC Unit at (919)814-6401 or (800)859-0829 (in state calls only) or by email at [DHHS.CBC.Unit@dhhs.nc.gov](mailto:DHHS.CBC.Unit@dhhs.nc.gov).

PLEASE RETAIN A COPY OF THIS LETTER FOR YOUR FUTURE USE.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF CHILD DEVELOPMENT AND EARLY EDUCATION

LOCATION: 333 Six Forks Rd • Raleigh, NC 27609

MAILING ADDRESS: 2201 Mail Service Center • Raleigh, NC 27699-2200

www.dhhs.gov • Tel: (919)715-6300 • Fax: (919)715-1013

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



North Carolina Board of Examiners  
for Speech-Language Pathologists  
and Audiologists

Christine Hraniotis Saunders

has completed all requirements to be licensed  
as a Speech Language Pathologist


License Number 3931

Issue Date: 08/07/2023

Expiration Date: 08/06/2024

*Michelle J. Offord*

Board Chair

| MEMORANDUM OF INSURANCE   |                    |                |   | Date Issued<br>August 23, 2023 |             |
|---|--------------------|----------------|---|--------------------------------|-------------|
| <b>Producer</b><br><br>Association Member Benefits Advisors, LLC.<br>P.O. Box 14576<br>Des Moines, IA 50306-3576<br>www.proliability.com  |                    |                | This memorandum is issued as a matter of information only and confers no rights upon the holder. This memorandum does not amend, extend or alter the coverages afforded by the Certificate listed below.  |                                |             |
| <b>Insured</b><br>Christine Hrani Saunders<br>605 Saint Catherines Drive<br>Wake Forest, NC 27587-6645  |                    |                | <b>Company Affording Coverage</b><br>Liberty Insurance Underwriters, Inc.   |                                |             |
| This is to certify that the Certificate listed below has been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term or condition of any contract or other document with respect to which this memorandum may be issued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions of such Certificate. The limits shown may have been reduced by paid claims. The Memorandum of Insurance and verification of payment are your evidence of coverage. No coverage is afforded unless the premium is successfully paid in full. |                    |                |   |                                |             |
| Type of Insurance   | Certificate Number | Effective Date | Expiration Date   | Limits                         |             |
| <b>Professional Liability</b><br>SpeechLangH SE<br>Speech Language Pathologist  | AHY-632553012      | 08/01/2023     | 08/01/2024  | Per Occurrence                 | \$1,000,000 |
|   |                    |                |   | Aggregate                      | \$3,000,000 |
| <b>General Liability</b>  |                    |                |   | Per Occurrence                 |             |
|   |                    |                |   | Aggregate                      |             |
| <b>PROOF OF INSURANCE</b>   |                    |                |   |                                |             |
| Certificate Holder:<br><br>Warren County Schools<br>P.O. Box 110,<br>Warrenton, NC 27589  |                    |                | Should the above described Certificate be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. |                                |             |
|   |                    |                | Authorized Representative<br><br>   |                                |             |

## Certificate Of Completion

Envelope Id: BEB39D9FDA754FE5B374A7D6468750F3

Status: Completed

Subject: Complete with DocuSign: 2023-2024 christine saunders contract.pdf, FY24 Christine Sanuders Cert...

Source Envelope:

Document Pages: 13

Signatures: 3

Envelope Originator:

Certificate Pages: 6

Initials: 2

Dywanda Pettaway

AutoNav: Enabled

P.O. BOX 110

Envelopeld Stamping: Enabled

109 Cousin Lucy's Lane

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Warrenton, NC 27589-0110

dpettaway@warrenk12nc.org

IP Address: 152.22.97.22

## Record Tracking

Status: Original

Holder: Dywanda Pettaway

Location: DocuSign

8/1/2023 12:18:51 PM

dpettaway@warrenk12nc.org

## Signer Events

Christine Saunders

csaunders19@nc.rr.com

Security Level: Email, Account Authentication  
(None)

## Signature



Signature Adoption: Drawn on Device

Using IP Address: 174.216.11.138

Signed using mobile

## Timestamp

Sent: 8/1/2023 12:28:01 PM

Viewed: 8/2/2023 10:00:39 AM

Signed: 8/2/2023 10:02:17 AM

### Electronic Record and Signature Disclosure:

Accepted: 8/2/2023 10:00:39 AM

ID: be079b6a-4764-4058-bf88-9c36b9bc0041

Donna Roberston

drobertson@warrenk12nc.org

Security Level: Email, Account Authentication  
(None)



Signature Adoption: Pre-selected Style

Using IP Address: 152.22.100.24

Sent: 8/1/2023 12:28:01 PM

Viewed: 8/1/2023 1:46:51 PM

Signed: 8/25/2023 8:35:49 AM

### Electronic Record and Signature Disclosure:

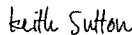
Accepted: 8/25/2023 8:35:25 AM

ID: 3da021e6-7bce-49da-9ec8-b67009c96e86

Keith Sutton

ksutton@warrenk12nc.org

Security Level: Email, Account Authentication  
(None)



Signature Adoption: Pre-selected Style

Using IP Address: 152.22.100.24

Sent: 8/1/2023 12:28:02 PM

Viewed: 8/24/2023 9:50:13 AM

Signed: 8/24/2023 9:50:19 AM

### Electronic Record and Signature Disclosure:

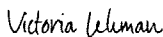
Accepted: 8/24/2023 9:50:13 AM

ID: 06513cdf-cdbf-4035-bba2-122ae809d9e8

Victoria Lehman

vlehman@warrenk12nc.org

Security Level: Email, Account Authentication  
(None)



Signature Adoption: Pre-selected Style

Using IP Address: 76.182.42.69

Sent: 8/1/2023 12:28:02 PM

Viewed: 8/3/2023 6:41:10 AM

Signed: 8/3/2023 6:42:07 AM

### Electronic Record and Signature Disclosure:

Accepted: 8/3/2023 6:41:10 AM

ID: 4ae3df53-5d4f-4a07-bee0-e1efa40e5372

| In Person Signer Events  | Signature        | Timestamp   |
|--|------------------|---|
| <b>Editor Delivery Events</b>  | <b>Status</b>    | <b>Timestamp</b>  |
| <b>Agent Delivery Events</b>   | <b>Status</b>    | <b>Timestamp</b>  |
| <b>Intermediary Delivery Events</b>  | <b>Status</b>    | <b>Timestamp</b>  |
| <b>Certified Delivery Events</b>   | <b>Status</b>    | <b>Timestamp</b>  |
| <b>Carbon Copy Events</b>  | <b>Status</b>    | <b>Timestamp</b>  |
| <p>Dywanda Pettaway<br/> dpettaway@warrenk12nc.org<br/> Executive Assistant<br/> Warren County Schools<br/> Security Level: Email, Account Authentication (None)<br/> <b>Electronic Record and Signature Disclosure:</b><br/> Not Offered via DocuSign</p> | <b>COPIED</b>    | <p>Sent: 8/1/2023 12:28:03 PM<br/> Viewed: 8/2/2023 10:10:58 AM</p> |
| <p>Marticia Vaughan<br/> mvaughan@warrenk12nc.org<br/> AP Clerk<br/> Warren County Schools<br/> Security Level: Email, Account Authentication (None)<br/> <b>Electronic Record and Signature Disclosure:</b><br/> Not Offered via DocuSign</p>             | <b>COPIED</b>    | <p>Sent: 8/1/2023 12:28:01 PM<br/> Viewed: 8/2/2023 1:11:02 PM</p>  |
| <p>monique alston<br/> malston@warrenk12nc.org<br/> Security Level: Email, Account Authentication (None)<br/> <b>Electronic Record and Signature Disclosure:</b><br/> Not Offered via DocuSign</p>   | <b>COPIED</b>    | <p>Sent: 8/1/2023 12:28:03 PM<br/> Viewed: 8/1/2023 12:52:31 PM</p> |
| <p>Shana Brown<br/> sbrown@warrenk12nc.org<br/> Security Level: Email, Account Authentication (None)<br/> <b>Electronic Record and Signature Disclosure:</b><br/> Accepted: 5/10/2023 12:49:39 PM<br/> ID: 77a07ad4-26cb-44c4-8977-3bf05fcf5570</p>        | <b>COPIED</b>    | <p>Sent: 8/1/2023 12:28:04 PM<br/> Viewed: 8/2/2023 12:07:41 PM</p> |
| <p>Tammie Harmon<br/> tharmon@warrenk12nc.org<br/> Warren County Schools<br/> Security Level: Email, Account Authentication (None)<br/> <b>Electronic Record and Signature Disclosure:</b><br/> Not Offered via DocuSign</p>                               | <b>COPIED</b>    | <p>Sent: 8/1/2023 12:28:03 PM</p>                                   |
| <b>Witness Events</b>  | <b>Signature</b> | <b>Timestamp</b>  |
| <b>Notary Events</b>   | <b>Signature</b> | <b>Timestamp</b>  |
| <b>Envelope Summary Events</b>   | <b>Status</b>    | <b>Timestamps</b>   |
| Envelope Sent  | Hashed/Encrypted | 8/1/2023 12:28:04 PM  |
| Envelope Updated   | Security Checked | 8/23/2023 12:39:25 PM   |
| Certified Delivered  | Security Checked | 8/3/2023 6:41:10 AM   |

| <b>Envelope Summary Events</b> | <b>Status</b>    | <b>Timestamps</b>    |
|--------------------------------|------------------|----------------------|
| Signing Complete               | Security Checked | 8/3/2023 6:42:07 AM  |
| Completed                      | Security Checked | 8/25/2023 8:35:49 AM |

| <b>Payment Events</b> | <b>Status</b> | <b>Timestamps</b> |
|-----------------------|---------------|-------------------|
|-----------------------|---------------|-------------------|

**Electronic Record and Signature Disclosure**