POVEN NUMBERS



GROUP RATING FOR WORKERS' COMPENSATION ANOTHER VALUE ADDED CHAMBER BENEFIT

The West Shore Chamber of Commerce is certified by the Ohio Bureau of Workers' Compensation as a sponsor for group rating discount programs. Join your fellow **Power of More chamber members** and take advantage of this value added membership benefit!

Power of More members taking advantage of the West Shore group rating program for workers' compensation will also receive unemployment compensation services FOR FREE! Request your no-cost, no-obligation quote today!

PÜWER OF MORE

More Benefits, More Opportunities, More Business

TESTIMONIALS:

"Before Spooner Inc., I really didn't know about all the cost savings I could obtain for my employment-related risks. Now I know that I can save big, and I also feel like they are a team I can trust moving forward. As a small company, I felt that it was important to align myself early on with a company like Spooner. I feel like they're my HR Department!"

- Dan C., CEO, Virteom

"Finally a group of competent consultants that actually do what they promise. With their help we've been able to gain control of our workers comp claims and our self insurance program which has saved us millions of dollars. Thanks Spooner!"

- Eric Z., V.P. of Risk Management, Saber Healthcare

POWER





To:	Ohio Bureau of Workers' Compensation			From: Policy number					
		Employer Services Department, 22 nd Floor Self-Insured Department, 27 th Floor		Entity					
	200		10/11/	1001	DBA				
		Please mark a box ar) :					
		Spooner Incorporated 28605 Ranney Parkway			Address				
		Westlake, Ohio 441							
		(440) 249-5200 (F	ax)						
- 2- 0,10 so <u></u>		ALLEGO DE SERVICIO DE LA COMPANSIONE D	TOWNS TO STATE OF STA	eron was was realized by the one	A STANDARD TO THE STANDARD TO		190 MARCH 190 MA		
must st request This is t	tamp it. ting serv to certify	Being temporary in natural vice relative to the authority that Spooner Inco	re, BWC will ty granted the prporated	ill not record via nerein. d (REP ID: 4	computer or retain this 420-80) including its ag	the employer services depa authorization. Representative gents or representatives iden	ve must possess a cop	y when	
retained	d to revi	iew and perform studies or	n certain wo	rkers' compensa	ation matters on our beha	df.			
		tter of authority provides mation relating to our ac		the following	This Authorization does not include the authority to:				
20 4504533		nation relating to our ac	count.			Review protest letters;			
	k files; aim files				File protest letters; File form Application for Handicap Reimbursement (CHP-4);				
Claim files Merit-rated or non-merit-rated experiences;					4. Notice of Appeal (IC-12) or				
4. Oth	ner asso	ociated data.			Application for Permanent Partial Reconsideration (IC-88); 5. File self-insurance applications; 6. Represent the employer at hearings;				
						ilar actions on behalf of the e	employer.		
under	rstand	that this authorization is	s limited ar	nd temporary in	nature and will expire	automatically on	, or nine n	nonths	
		e received by the employers will not exceed nine ma		ces or self-ins	ured departments, wr	nichever is appropriate. In	n either case, the ler	igth of	
author	Zation	WIII HOL EXCEED TIME HA	onuis.						
Telep	hone nu	ımber		Fax number		E-mail address			
Print r	name		Title		Cignoture		Data		
Fline	lanie		Tiue		Signature		Date		
							•		
Comp	letion o	f the temporary authorizat	tion provides	s a third-party ad	Iministrator (TPA) limited	authority to view an employ	er's payroll and loss exp	perience.	
By sig	ning the	e AC-3, the employer gran an employer's information	its permission	on to the BWC to	release information to the	ne employer's authorized repr	resentative(s). The form	allows a	
IFA	D VIEW C	in employer's information	regarding po	ayron, cianns and	a experience modification	l.			
		oup rating prospects							
• E	Employe	rs may complete the AC-3	3, for as man	y TPAs or group	-rating sponsors as they f	eel are necessary to obtain q	uotes for a group-rating	program.	
						he next group rating year. The		ication is	
100		ntial group-rating prospects			prior to the second Filua	ay in August for public employ	yers.		
		e BWC coverage status as			.				
	Active	e coverage from the applic utstanding balances;							
		Atotalianing balancoo,							

Any changes to a group member's policy will affect the group policy. Changes can result in either debits or credits to each of the members. Note:

For complete information on rules for group rating, see Rules 4123-17-61 through 4123-17-68 of the Ohio Administrative Code or your TPA. All group-rating applicants are subject to review by the BWC employer programs unit.

Operations similar in nature to the other members of their group.