

## LOCAL AGENCY WORKERS' COMPENSATION EXCESS JOINT POWERS AUTHORITY (LAWCX)

## 2025/2026 MEMORANDUM OF COVERAGE

## Policy Number: LAWCX 25.26 DECLARATION

ITEM #1	COVERED MEMBER:	<b>City of Alameda</b> 2263 Santa Clara A Alameda, CA 9450	
	Expanded Covered Members Identified in Schedule A of MOC	Alaineua, CA 9430	1
ITEM #2	COVERAGE PERIOD:	FROM 7/1/2025 TO 7/1/2026 12:01 a.m. Pacific Standard Time	
ITEM #3	LIMIT OF LIABILITY:		
	a. COVERED MEMBER'S RETAINED LIMIT: Workers' Compensation Coverage Employer's Liability Coverage		\$500,000 \$500,000
	b. LAWCX SELF-INSURED RET	ENTION:	
	Workers' Compensation Coverage		\$5 Million Less Member's Retained Limit
	Employer's Liability Coverage		\$5 Million Less

\$5 Million Less Member's Retained Limit

ON BEHALF OF THE LOCAL AGENCY WORKERS' COMPENSATION EXCESS JOINT POWERS AUTHORITY

Authorized Signature