



ILLINOIS WORKERS' COMPENSATION COMMISSION
SELF-INSURER'S AGREEMENT TO POST LETTER OF CREDIT
SCHEDULE OF SUPPLEMENT

To be attached to and form a part of the Self-Insurer's Agreement to Post Letter of Credit

Employer Name: _____ Date: _____
Address: _____

Issuing Bank Name: _____ LOC No.: _____
Address: _____ Amount \$: _____

Confirming Bank Name: _____ Confirmation No.: _____
Address: _____

Whereas, the Employer has previously entered into a Self-Insurers Agreement to Post Letter of Credit ("Agreement") to which this Schedule is attached; and

Whereas, the Employer wishes to supplement one or more of the letter(s) of credit ("Letter of Credit") deposited with the Illinois Workers' Compensation Commission ("Commission") pursuant to the terms of the Agreement and/or pursuant to the terms of any other schedule(s) attached thereto.

Now, therefore, as a condition of its continued qualification for the self-insurance privilege or for the use and benefit of its employees as a former self-insurer, the Employer is depositing with the Commission the irrevocable Letter of Credit issued in favor of the Commission under the number listed above and the confirmation of the Letter of Credit issued under the confirmation number listed above (if any). The Employer agrees that the Letter of Credit and the Confirmation (if any) shall be held by the Commission under the same terms and conditions and for the same purposes as are recited in the Agreement.

The Employer acknowledges that as of the date above the following Letter(s) of Credit are being held by the Commission subject to the terms and conditions of the Agreement.

Table with 3 columns: NAME OF ISSUING BANK, LETTER OF CREDIT NUMBER, AMOUNT. Includes a row for TOTAL AMOUNT OF LETTERS OF CREDIT.

EMPLOYER CORPORATE SEAL

Signature of Employer's representative _____ Date _____

Name and title _____

This Agreement is approved by the Illinois Workers' Compensation Commission

Chairman _____ Date _____