Ą		ERTIFICATE OF LIABILITY INSURANCE				E [	DATE (MM/DD/YYYY) 2/28/2022			
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.										
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).										
PRODUCER Arthur J. Gallagher & Co. Insurance Brokers of CA. Inc. LIC #0726293 505 N. Brand Boulevard, Suite 600					CONTACT NAME: PHONE (A/C, No, Ext): 818-539-1347 E-Mail ADDRESS: E-Mail					
Glendale CA 91203				INSURER(S) AFFORDING COVERAGE NAIC #						
					INSURER A : United Educators Ins, a Reciprocal Risk Retention 10					
ABC Bus Company				INSURER B : Hartford Casualty Insurance Company INSURER c : Hartford Fire Insurance Company					29424 19682	
123 Anywhere St. Anytown, CA 95614				INSURER D :					TOOL	
					INSURER E :					
<u> </u>	VERAGES CER									
			E NUMBER: 1528600058 JRANCE LISTED BELOW HAV	VE BEEN	E 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 CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.										
INSR LTR	TYPE OF INSURANCE	ADDL SUB			POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	TS		
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Y	A000876543D		9/1/2021	9/1/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000 \$ 1,000		
							MED EXP (Any one person)	\$ 5,000		
						3	PERSONAL & ADV INJURY	\$ Includ		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$10,00		
	X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ Incluc	led	
с	AUTOMOBILE LIABILITY		72UEM6549873		9/1/2021	9/1/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 10,000,000		
		Y					BODILY INJURY (Per person)			
	OWNED SCHEDULED AUTOS ONLY AUTOS HIRED NON-OWNED						BODILY INJURY (Per accident PROPERTY DAMAGE			
	AUTOS ONLY X CompDed:1000 X CollDed:1000						(Per accident)	\$ \$		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	DED RETENTION \$							\$		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N		72 <b>N</b> M97863218		6/1/2021	6/1/2022	X PER OTH- STATUTE ER			
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT \$1,000, E.L. DISEASE - EA EMPLOYEE \$1,000,			
	landatory in NH) yes, describe under SCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT \$1,000				
				-				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
DES	CRIPTION OF OPERATIONS / LOCAT		/EHICLES (ACORD 101 A	dditiona	l Remarks	Schedule m	av he attached if more	snace i	s required)	
	pject to all policy terms, condition					benedule, m		Space i	srequirea	
	apman University is included as						n contract or agreer	nent a	nd to the	
exte	ent insurable as respects their ir	iterest i	in the operations of the	e Name	a insurea	•				
CERTIFICATE HOLDER CANCELLATION										
	Chapman University One University Dr Orange CA, 92688		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
	_	AUTUOD								
					AUTHORIZED REPRESENTATIVE					
BuymPresall										
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