ACORD'

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/22/2024

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 Lockton Affinity, LLC 10895 Lowell Avenue, St	uite 300	CONTACT NAME: Lockton Affinity PHONE (A/C NO Ext): 844-401-9444 (A/C, No):									
Overland Park, KS 66210		E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC #									
		INSURER(S) AFFORDING COVERAGE									
		INSURER A: Certain Underwrite	er's at Lloyd's, Londo	AA1128621							
INSURED		INSURER B:									
2nd Wisconsin Volum W9041 Spruce Road	teer Infantry Association Inc	INSURER C:									
Beaver Dam WI 53916		INSURER D :									
		INSURER E :									
		INSURER F :									
COVERAGES	CERTIFICATE NUMBER	R	EVISION NUMBER								
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THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE 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.

SR TYPE OF INSURANCE			ADDL SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
4	X C	COMMERCIAL GENERAL LIABILITY Claims Made X Occur					EACH OCCURRENCE DAMAGE TO HENTED PREMISES (Ea occurrence)	\$1,000,000 \$250,000		
				LOC-GL-B000761-00	02/23/2024	02/23/2025	MED EXP (Any one person)	\$ 5,000		
	and the same of the same of						PERSONAL & ADV INJURY	\$1,000,000		
mark .	deni itti yenema	AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$1,000,000		
1	X p	POLICY PROJEC LOC					PRODUCTS - COMP/OP AGG	\$ 1000000		
1		THER MOBILE LIABILITY					COMBINEO SINGLE LIMIT (Ea accident)	S		
	A	NY AUTO		X)			BODILY INJURY (Per person)	\$		
T	0	DWNED AUTOS SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$		
	1	HIRED AUTOS NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$		
								S		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	E	XCESS LIAB CLAIMS-					AGGREGATE	\$		
	D			the delicense and the contract of the contract				\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If vos. obscribe under							PER STATUTE ER	attention of the consignation and adjust the constitution of the c		
			N/A				E.L. EACH ACCIDENT	s		
							E.L. DISEASE - EA EMPLOYEE	\$		
DESCRIPTION OF OPERATIONS below						1	E.L. DISEASE - POLICY LIMIT	\$		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

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CANCELLATION

PROOF OF COVERAGE

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

9BA

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ACORD 25 (2016/03)

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