



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

SAMPLE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY. IT DOES NOT CONFER ANY RIGHTS TO THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY NEGATE, IN ANY MANNER, ANY OTHER TERMS OR CONDITIONS OF THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF LIABILITY INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE INSURED AND THE INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER. THIS CERTIFICATE IS SUBJECT TO THE TERMS, CONDITIONS, EXCLUSIONS AND LIMITS OF THE POLICIES REFERENCED HEREIN.

IMPORTANT: If the certificate holder or insured is not the named insured on the policy(ies) and the policy(ies) do not have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, the certificate holder is subject to the terms and conditions of the policy, and the certificate holder may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

Producer Insured FIVECOL-01	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">CONTACT NAME:</td> </tr> <tr> <td>PHONE (A/C, No, Ext):</td> <td>FAX (A/C, No):</td> </tr> <tr> <td colspan="2">E-MAIL ADDRESS:</td> </tr> <tr> <td colspan="2" style="text-align: center;">INSURER(S) AFFORDING COVERAGE</td> </tr> <tr> <td>INSURER A :</td> <td>NAIC #</td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	CONTACT NAME:		PHONE (A/C, No, Ext):	FAX (A/C, No):	E-MAIL ADDRESS:		INSURER(S) AFFORDING COVERAGE		INSURER A :	NAIC #	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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COVERAGES **CERTIFICATE NUMBER:** 839607556 **REVISION NUMBER:**

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR SIR: \$200,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> PRO-POLICY <input type="checkbox"/> SUBJECT LOC OTHER: AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> N/A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		A8761U	7/1/2023	7/1/2024	EACH OCCURRENCE\$ DAMAGE TO RENTED PREMISES (Ea occurrence)\$ 1,000,00 0 MED EXP (Any one person)\$ 1,000,00 PERSONAL & ADV INJURY\$ Included GENERAL AGGREGATE\$ 3,200,000 PRODUCTS - COMP/OP AGG\$ Included \$ COMBINED SINGLE LIMIT (Ea accident)\$ BODILY INJURY (Per person)\$ BODILY INJURY (Per accident)\$ PROPERTY DAMAGE (Per accident)\$ \$ EACH OCCURRENCE\$ AGGREGATE \$ \$ STATUTE ER PER OTH- E.L. EACH ACCIDENT\$ E.L. DISEASE - EA EMPLOYEE\$ E.L. DISEASE - POLICY LIMITS\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Event/Purpose:2023 AASHE Conference & Expo
 Event Start Date:2023-10-29
 Event End Date: 2023-10-31

CERTIFICATE HOLDER AASHE (at Government Center) 1 Washington Mall #1295 Boston, MA 02108	CANCELLATION 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
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