

**KWISOR** 

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/19/2020

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

th	nis certificate does not confer rights to			ch end	lorsement(s)		require air endors	Scilicit. A	statement on	
	DUCER				CT Kelley J					
Brunswick Insurance Agency, Inc. 5309 Transportation Blvd					o, Ext): (330) 8	64-8800	FA   (A	<sup>AX</sup> /C, No):(330	) 864-8661	
	veland, OH 44125			E-MAIL ADDRE	SS:					
					INS	URER(S) AFFOR	RDING COVERAGE		NAIC #	
				INSURE	R A : Hanove	r Insurance	e Companies		22292	
INSU	JRED	INSURER B:								
	Pratt Adjustment Bureau	INSURER C:								
6810 Downing St. Denver, CO 80229					INSURER D:					
					INSURER E :					
		INSURER F:								
			TE NUMBER:				REVISION NUMB			
IN C	HIS IS TO CERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH F	EQUIRE! PERTAII	MENT, TERM OR CONDITION N, THE INSURANCE AFFORI	N OF A DED BY	NY CONTRAC THE POLICI	CT OR OTHER ES DESCRIB	DOCUMENT WITH	RESPECT T	TO WHICH THIS	
INSR LTR		ADDL SUE	BR	<b>D</b>	POLICY EFF (MM/DD/YYYY)			LIMITS		
LIK	COMMERCIAL GENERAL LIABILITY	INSD WV	70		(IVIIVI/DD/TTTT)	(IVIIVI/DD/TTTT)	EACH OCCURRENCE	\$		
	CLAIMS-MADE OCCUR						DAMAGE TO RENTED			
							PREMISES (Ea occurre  MED EXP (Any one pers			
							PERSONAL & ADV INJ			
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGAT			
	POLICY PRO- JECT LOC						PRODUCTS - COMP/O			
	OTHER:							\$		
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIF (Ea accident)			
	ANY AUTO						BODILY INJURY (Per pe	erson) \$		
	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per a	ccident) \$		
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
								\$		
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	DED RETENTION \$						1050	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)  If yes, describe under						E.L. DISEASE - EA EMP	PLOYEE \$		
	DESCRIPTION OF OPERATIONS below		4000400		2/24/2020	2/24/2022	E.L. DISEASE - POLICY	Y LIMIT \$	4 000 000	
А	Fidelity / Crime		1062189		3/31/2020	3/31/2023	Client Property		1,000,000	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL Fidelity / Crime Coverage Policy is writt 0,000 is held by Allied Finance Adjusters					e space is requir I renewed or	<sup>ed)</sup> cancelled prior. Th	ne retention	n / deductible of	
CERTIFICATE HOLDER					CANCELLATION					
+++ For Informational Purposes Only +++					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
				AUTHO	RIZED REPRESEI #	NTATIVE				