**CSANDERSON** 

ACORD

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 6/4/2024

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).

Ŀ	this certificate does not confer rights	to th	e cei	tificate holder in lieu of su	ıch en	dorsement(s	).	y require an endorseme	TIL. 7.	statement on	
	ODUCER				CONTA NAME:	<sup>ACT</sup> Jennifer	Robinson	4			
General Agency Company 525 E. Broadway Mount Pleasant, MI 48858						PHONE (A/C, No, Ext): (989) 817-4265 FAX (A/C, No): (989)				772-1855	
						E-MAIL ADDRESS: jrobinson@ga-ins.com					
					INSURER(S) AFFORDING COVERAGE					NAIC#	
						INSURER A : Employers Mutual Casualty Co				21415	
INSURED						INSURER B : EMCASCO Insurance Company				21407	
Calhoun Community High School						ERC:		noo oompany			
765 Upton Ave Springfield, MI 49037						INSURER D:					
					INSURER E :						
					INSURER F:						
~	OVERAGES CEI	TIFE	CAT	E NUMBER:	INSURI	ERF:		REVISION NUMBER:			
I	THIS IS TO CERTIFY THAT THE POLICI NDICATED. NOTWITHSTANDING ANY I CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	IES C REQU PEF POL	OF IN IIREN RTAIN ICIES	SURANCE LISTED BELOW HENT, TERM OR CONDITION I, THE INSURANCE AFFORD III LIMITS SHOWN MAY HAVE	N OF A	ANY CONTRAI Y THE POLIC REDUCED BY	CT OR OTHEI IES DESCRIE PAID CLAIMS	RED NAMED ABOVE FOR R DOCUMENT WITH RESP	ECT TO	WHICH THIS	
LTR	TYPE OF INSURANCE	INSC	SUBI	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	TS		
Α	71							EACH OCCURRENCE	\$	1,000,000	
	CLAIMS-MADE X OCCUR			6D21210		7/1/2024	7/1/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000	
								MED EXP (Any one person)	\$	10,000	
								PERSONAL & ADV INJURY	s	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:  X POLICY PRO- LOC					,		GENERAL AGGREGATE	s	3,000,000	
								PRODUCTS - COMP/OP AGG	1782	3,000,000	
	OTHER:							111000010 001111101 7100	s		
A	AUTOMOBILE LIABILITY						7/1/2025	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	X ANY AUTO			6E21210		7/1/2024		BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)			
	HIRED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	ASTOSONET							(i di docident)	\$		
Α	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	s	5,000,000		
	EXCESS LIAB CLAIMS-MADE			6J21210		7/1/2024	7/1/2025	AGGREGATE	Total Control	5,000,000	
	DED X RETENTION\$ 10,000							Pers/Adv Injury	s	5,000,000	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							X PER STATUTE OTH-	3		
				6H21210		7/1/2024	7/1/2025			1,000,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDENT	\$	1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE		1,000,000	
Α	Linebacker			6K21210		7/1/2024	7/1/2025	E.L. DISEASE - POLICY LIMIT Per Occurrence	\$	1,000,000	
Α	Retro Date: 7/1/2000			6K21210	1	7/1/2024		Aggregate		3,000,000	
			. 1		- 1		.,	Aggregate		3,000,000	
MAG	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI O Stars Spring Competition day notice of cancellation applies, 10 o				e, may be	attached if more	space is require	ed)			
CERTIFICATE HOLDER						CANCELLATION					
Delta College 1961 Delta Rd University Center, MI 48710						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
						UTHORIZED REPRESENTATIVE					
						Juf B. Reinlandt					
		T U. Bunneral									