ACORD...

certificate holder in lieu of such endorsement(s)

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/03/2020

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.

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must 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

PRODUCER		CONTACT	NAME: Desirae Bohannon						
Terry L Green & Associates		PHONE (A	PHONE (A/C, No. Ext): (678) 205-8055 FAX (A/C, No): (678) 205-8045						
3100 Five Forks Trickum Roa Ste 101 Lilburn, GA 30047	d	E-MAIL ADDRESS: desirae@AYSAA.com							
NSURED			INSURER(5) AFFORDING	COVERAGE	NAIC#				
Lady Meanstreets 16403 S. Emerald	INSURER A	INSURER A: Nationwide Mutual Insurance Company 23							
TOTO OF EMISSION		NSURER E	3:						
Harvey, IL 60426		INSURER C	INSURER C:						
A Member of the Sports, Leist	ure & Entertainment RPG	INSURER C):						
COVERAGES	CERTIFICATE NUMBER:	OBBIL020575-2	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.

INST. TYPE OF INSURANCE ADDITIONAL POLICY NUMBER POLICY FFF POLICY EXP. LIMITS

INSR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF	(MM/DD/YY)		LIMITS	
Α	CLAIMS-MADE X OCCUR			6B RPG 00000072062-00	02/04/2020 12:01 AM	02/04/2021 12:01 AM	EACH OCCURRENT DAMAGE TO RENT PREMISES (Es occi	ED	\$1,000,000 \$1,000,000
					12,01700	72.0174	MED EXP (Any one		\$5,000
							PERSONAL & ADV	NJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROJECT LOC OTHER						GENERAL AGGREGATE PRODUCTS-COMP/OP AGG	\$5,000,000 \$1,000,000	
							PROFESSIONAL LI	BILITY	\$1,000,000
1							LEGAL LIAB TO PA	RTICIPANTS	\$1,000,000
Α	AUTOMOBILE LIABILITY		6B RPG 00000072062-00	02/04/2020	02/04/2021	COMBINED SINGLE LIMIT (Es Accident)		\$1,000,000	
	ANY AUTO			05 Ki G 00000072002-00	12:01 AM	12:01 AM	BODILY INJURY (Pe	r person)	
	ALL OWNED AUTOS SCHEDULED AUTOS				, , , , , , , , , , , , , , , , , , , ,	.,	BODILY INJURY (Pe	r accident)	
	X HIRED AUTOS X NON-OWNED X Not provided while in Hawaii						PROPERTY DAMAG (Per accident)	38	
_	UMBRELLA LIAB OCCUR		-			-	EACH OCCURRENCE	æ	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N	_					PER STATUTE	OTHER	
	ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			E.L. EACH ACCIDENT					
							E.L. DISEASE - EA	EMPLOYEE	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT		
Α	MEDICAL PAYMENTS FOR PARTICIPANTS						PRIMARY MEDICAL		
	BIDTION OF ODERATIONS IT OCATIONS / VEHIC			6B RPG 00000072062-00	02/04/2020 12:01 AM	02/04/2021 12:01 AM	EXCESS MEDICAL		\$25,000

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

Legal Liability to Participants (LLP) limit is a per occurrence limit

Sport(s): Youth Basketball Age(s): 13-15

The certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured.

Membership ID: 0BBIL020575

CERTIFICATE HOLDER

Bryant School 14730 Main St.

Harvey, IL 60426

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

Scott But al

Coverage is only extended to U.S. events and activities.

** NOTICE TO TEXAS INSUREDS: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.

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ACORD_{IM}

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/03/2020

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teri	ORTANT: If the certificate holder is ms and conditions of the policy, cer	tain p	olicie						
	tificate holder in lieu of such endorse	ment	(5),			De la	Dahaman		
	ry L Green & Associates					NAME: Desirae		EAV (AIC No.) (679) 20E	0045
	0 Five Forks Trickum Road				PHONE (A	/C, No. Ext): (67)	3) 203-6055	FAX (A/C, No): (678) 205-	8045
Ste	101 urn, GA 30047				E-MAIL AI	DRESS: desira	e@AYSAA.co	om	
INSL	IRED					INSURFR	S) AFFORDING	COVERAGE	NAIC #
	ly Meanstreets				INSURER			ance Company	23787
164	103 S. Emerald				INSURER		Wildiam Wilder	artoo company	20707
	rvey, IL 60426			1	INSURER	C:			
A N	lember of the Sports, Leisure & Entertain	nment	RPG		INSURER	D:			
_				E NUMBER: 0BB L020			NUMBER:		
NOT	S IS TO CERTIFY THAT THE POLICIES OF I WITHSTANDING ANY REQUIREMENT, TEI JED OR MAY PERTAIN, THE INSURANCE I THE POLICIES. LIMITS SHOWN MAY HAVE E	RM OF AFFOR IEEN F	REDUC	DITION OF ANY CONTRAC BY THE POLICIES DESCRI ED BY PAID CLAIMS.	OR O	THER DOCUME!	IT WITH RESI	PECT TO WHICH THIS CE	RTIFICATE MAY BE
INSF		ADDL INSD	SUBR			POLICY EFF (MM/DD/YY)	POLICY EXP	LIMITS	
A		X	WAND			(mmuDD/11)	(Mahnati)	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR			6B RPG 00000072062-00		02/04/2020	02/04/2021	DAMAGE TO RENTED	
						12:01 AM	12:01 AM	PREMISES (Ea occurrence) MED EXP (Any one person)	\$1,000,000
								PERSONAL & ADV INJURY	\$5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$1,000,000 \$5,000,000
	POLICY PROJECT LOC							PRODUCTS-COMP/OP AGG	\$1,000,000
								PROFESSIONAL LIABILITY	\$1,000,000
								LEGAL LIAB TO PARTICIPAN	s \$1,000,000
Α	AUTOMOBILE LIABILITY			6B RPG 00000072062-00		02/04/2020	02/04/2021	COMBINED SINGLE LIMIT (Ea Accident)	\$1,000,000
	ANY AUTO			05 10 3 0000007 2002-00		12:01 AM	12:01 AM	BODILY INJURY (Per person)	
	ALL OWNED AUTOS SCHEDULED AUTOS							BODILY INJURY (Per accident)	
	Y HIPED AUTOS V NON-OWNED							PROPERTY DAMAGE	
	A0103							(Per accident)	
_	X Not provided while in Hawaii								
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	
	DED RETENTION							AGGREGATE	
_	DED RETENTION WORKERS COMPENSATION							The	
	AND EMPLOYERS' LIABILITY Y/N							PER STATUTE OTHE	R
	ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER				- 1			E.L. EACH ACCIDENT	
	EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYE	E
	If yes, describe under DESCRIPTION OF OPERATIONS							E.L. DISEASE - POLICY LIMIT	
A	MEDICAL PAYMENTS FOR PARTICIPANTS	_						PRIMARY MEDICAL	+
				6B RPG 00000072062-00		02/04/2020	02/04/2021	EXCESS MEDICAL	\$25,000
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	ES IA	CORD 1	At Additional Ramarka School	ula man h	12:01 AM	12:01 AM		\$25,000
Lega Spo The	al Liability to Participants (LLP) limit is a rt(s): Youth Basketball certificate holder is added as an addition	per o	ccurre	nce limit Age(s): 13-15					insured.
	nbership ID: 0BBIL020575				04110	TI CATION			
	ITIFICATE HOLDER					ELLATION	ADOME BESS	DIDED DALIGHED TO CO.	
Gw 147	endolyn Brooks Junior High Sch 41 Wallace St.	ool			THE EX	(PIRATION DAT RDANCE WITH T	E THEREOF, N HE POLICY P	RIBED POLICIES BE CAN IOTICE WILL BE DELIVER ROVISIONS.	CELLED BEFORE ED IN
	vey, IL 60426				1	TIZED REPRESENT			
					1. 5-9	-1 morph	VI		

Coverage is only extended to U.S. events and activities.

** NOTICE TO TEXAS INSUREDS: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas. ACORD 25 (2014/01) © 1988-2014 ACORD CORPORATION. All rights reserved.

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REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must 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

PRODUCER		CONTACT NAME: Desirae Bohannon	CONTACT NAME: Desirae Bohannon					
Terry L Green & Associates		PHONE (A/C, No. Ext): (678) 205-8055 FAX (A/C, No): (678) 205-8045						
3100 Five Forks Trickum Road Ste 101 Lilburn, GA 30047		E-MAIL ADDRESS: desirae@AYSAA.co	E-MAIL ADDRESS: desirae@AYSAA.com					
NSURED Ladv Meanstreets		INSURER(S) AFFORDING	INSURER(S) AFFORDING COVERAGE					
16403 S. Emerald		INSURER A: Nationwide Mutual Insura	ance Company	23787				
		INSURER 8:						
Harvey, IL 60426 Member of the Sports, Leisu	e 8 Entertainment DDG	INSURER C:						
Wenter of the Sports, Leisur	e & Entertainment RPG	INSURER D:						
COVERAGES	CERTIFICATE NUMBER: 08	BIL020575-3 REVISION NUMBER:						
HIS IS TO CERTIFY THAT THE F OTWITHSTANDING ANY REQUI	OLICIES OF INSURANCE LISTED BELOW HAT REMENT, TERM OR CONDITION OF ANY CO	VE BEEN ISSUED TO THE INSURED NAMED A ONTRACT OR OTHER DOCUMENT WITH RESI	ABOVE FOR THE POLICE	CY PERIOD INDIC				

SSUED 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	TTPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YY)	POLICY EXP	LIMITS	
Α	X COMMERCIAL GENERAL LIABILITY			6B RPG 00000072062-00	02/04/2020		EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR			66 KFG 00000072062-00	12:01 AM	02/04/2021 12:01 AM	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
							MED EXP (Any one person)	\$5,000
							PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROJECT LOC OTHER						GENERAL AGGREGATE	\$5,000,000
							PRODUCTS-COMP/OP AGG	\$1,000,000
							PROFESSIONAL LIABILITY	\$1,000,000
							LEGAL LIAB TO PARTICIPANTS	\$1,000,000
Α	AUTOMOBILE LIABILITY			6B RPG 00000072062-00	02/04/2020		COMBINED SINGLE LIMIT (Ea Accident)	\$1,000,000
	ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS				12:01 AM		BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION						EACH OCCURRENCE	
-							AGGREGATE	
- 1	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N				-		PER STATUTE OTHER	
	ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	
							E.L. DISEASE - EA EMPLOYEE	
- 1	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	
A	MEDICAL PAYMENTS FOR PARTICIPANTS						PRIMARY MEDICAL	
				6B RPG 00000072062-00 01, Additional Remarks Schedule, n	02/04/2020 12:01 AM	02/04/2021 12:01 AM	EXCESS MEDICAL	\$25,000

Legal Liability to Participants (LLP) limit is a per occurrence limit Sport(s): Youth Basketball

Age(s): 13-15

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Membership ID: 0BBIL020575

CERTIFICATE HOLDER

Whittier Elementary School 71 E. 152nd St.

Harvey, IL 60426

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