

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/14/2023

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						CT Kathy Hoy	/er					
McGowan Insurance Group						PHONE (317) 464-5000 (A/C, No, Ext): (317) 464-5001						
355 Indiana Avenue						E-MAIL kathyhoyer@mcgowaninc.com						
Suite 200						INSURER(S) AFFORDING COVERAGE						
Indianapolis IN 46204						INSURER A: Markel Insurance Company					38970	
INSURED						INSURER B: Eastern Alliance Insurance Group					10724	
Murat Shriners, A Division of Shriners International						INSURER C:						
510 N. New Jersey						INSURER D :						
						INSURER E :						
Indianapolis IN 46204					INSURER F:							
CO	VERAGES CERT	ΓIFIC	ATE I	NUMBER: 2023-24 Maste	er 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. INSIR INDICYTEEF POLICYTEEP												
INSR LTR		INSD				POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		'S		
А	CLAIMS-MADE OCCUR					11/01/2023	11/01/2024	EACH OCCURRENCE \$ 1,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,0 MED EXP (Any one person) \$ 5,000			,000	
											00	
				MNSP000041				PERSONAL & ADV I	NJURY	00,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	ATE	00,000		
	POLICY PRO- JECT LOC							PRODUCTS - COMP	RODUCTS - COMP/OP AGG \$ 2,000			
	OTHER:							Liquor Liability		\$ 1,00	0,000	
А	ANY AUTO							COMBINED SINGLE (Ea accident)	LIMIT	00,000		
								BODILY INJURY (Per person) \$				
	OWNED SCHEDULED AUTOS ONLY		MNSA000041			11/01/2023	11/01/2024	BODILY INJURY (Per accident) \$				
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident) \$				
										\$ 1,00	00,000	
	✓ UMBRELLA LIAB ✓ OCCUR		MNSU			11/01/2023	11/01/2024	EACH OCCURRENCE		\$ 5,00	00,000	
Α	EXCESS LIAB CLAIMS-MADE			MNSU000041				AGGREGATE		\$ 5,00	00,000	
	DED RETENTION \$ 10,000									\$		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					11/01/2023	11/01/2024	➤ PER STATUTE	OTH- ER			
				01-0000136382-00				E.L. EACH ACCIDEN	IT	\$ 500	,000	
			01 0000100002 00			,, 2020		E.L. DISEASE - EA EMPLOYEE		\$ 500	,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT		\$ 500	,000			
	Property							Contents		\$1,1	110,896	
Α	lipporty			MNSP00041		11/01/2023	11/01/2024	Deductible		\$5,0	000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Re: Crawfordsville Christmas Parade 12-03-2023 Crawfordsville, IN. The following apply when required by written contract: General Liability Additional Insured and Waiver of Subrogation per form MGL 1562 (12/20).												

CERTIFICATE HOLDER

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

Crawfordsville

IN

ACCHARGE

AUTHORIZED REPRESENTATIVE