

## WESTU-1

OP ID: BB

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/27/2017

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

PRODUCER Lee Insurance Agency, Inc. 8727 FM 1960 East Humble, TX 77346 Clint A. Henson	281-812-8400	CONTACT Clint A. Henson				
		PHONE (A/C, No, Ext): 281-812-8400 FAX (A/C, No):		281-812-8300		
		E-MAIL ADDRESS: chenson@leeinsuranceagency.com				
		INSURER(S) AFFORDING O	NAIC#			
		INSURER A : Hanover Insurance Con	22292			
INSURED West University UMC Methodist Church 3611 University Blvd Houston, TX 77005		INSURER B : Allmerica Financial Ber	41840			
		INSURER C: AmTrust Financial Serv				
		INSURER D :				
		INSURER E :				
		INSURER F:				

CERTIFICATE 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,

NSR LTR	TYPE OF INSURANCE	DDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	s	
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR  X D&O \$1M/3M,  X Prof Liab \$1M/3M  GEN'L AGGREGATE LIMIT APPLIES PER:  POLICY PRO LOC		ZHDD372762-00	09/17/2017	09/17/2018	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ \$ \$ \$ \$	2,000,000 100,000 10,000 2,000,000 4,000,000
В	OTHER:					Emp Ben.	\$	1,000,000
	ANY AUTO OWNED AUTOS ONLY  X HIRED AUTOS ONLY X AUTOS ONLY		AWDD37277300	09/17/2017	09/17/2018	COMBINED SINGLE LIMIT (Ea accident)  BODILY INJURY (Per person)  BODILY INJURY (Per accident)  PROPERTY DAMAGE (Per accident)	\$ \$ \$ \$	1,000,000
Α	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE  DED RETENTION \$		UHDD372765-00	09/17/2017	09/17/2018	EACH OCCURRENCE AGGREGATE	\$	10,000,000 10,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	/A	SWC1167610	09/17/2017	09/17/2018	PER STATUTE OTH- E.L. EACH ACCIDENT  E.L. DISEASE - EA EMPLOYEE	\$ \$	1,000,000
	Property Section		ZHDD372762-00	09/17/2017		E.L. DISEASE - POLICY LIMIT Building Contents	\$	1,000,000 7,022,110 1,120,000

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

This certificate supercedes any/all previously issued certificates of insurance.

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**Boy Scout Troop 266** 3611 University Blvd Houston, TX 77005

CANCELLATION

BOYSCOU

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**