

CERTIFICATE OF LIABILITY INSURANCE

TMUMPFIELD

DATE (MM/DD/YYYY) 4/6/2021

TRAICRE-01

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).

	his certificate does not confer rights to				ch end	orsement(s)		require an endorsemen	i. A Si	atement on	
PRODUCER Brunswick Insurance Agency, Inc. 5309 Transportation Blvd Cleveland, OH 44125						CONTACT Teresa Bennett					
						PHONE					
						E-MAIL ADDRESS: tbennett@brunswickcompanies.com					
						INS	SURER(S) AFFOI	RDING COVERAGE		NAIC #	
					INSURE	R A : Hanove	r Insuranc	e Companies		22292	
INSURED						RB:					
	Trainwell Creditor Services				INSURER C:						
1418 E Madison Des Moines, IA 50313						INSURER D :					
						INSURER E :					
						INSURER F:					
СО	VERAGES CERT	TIFIC	ATE	NUMBER:				REVISION NUMBER:			
IN C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH F	EQUIF PERT	REME AIN,	ENT, TERM OR CONDITION THE INSURANCE AFFORI	N OF A	NY CONTRAC	CT OR OTHER	R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT T	CT TO	WHICH THIS	
INSR LTR		ADDL	SUBR		DELINI	POLICY FFF	POLICY EXP	LIMIT	<u> </u>		
LIK	COMMERCIAL GENERAL LIABILITY	INSD	WVD	1 OLIOT HOMBER		(MM/DD/YYYY)	(MM/DD/YYYY)				
	CLAIMS-MADE OCCUR							EACH OCCURRENCE DAMAGE TO RENTED	\$		
	02 mme mm 122 000011							PREMISES (Ea occurrence)	\$		
								MED EXP (Any one person) PERSONAL & ADV INJURY	\$		
	CENII ACCRECATE LIMIT APPLIES DED.								\$		
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROJECT LOC							GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ \$		
	OTHER:							PRODUCTS - COMP/OP AGG	\$ \$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$ \$		
	ANY AUTO							(Ea accident) BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Fel accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION\$							AGGREGATE	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER	Ψ		
	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	•		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
Α				1062466		3/31/2021	3/31/2022	Client Property	Ψ	1,000,000	
DES This	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL S Fidelity / Crime Coverage Policy is writt	ES (A	CORD) 101, Additional Remarks Schedu Three Year Term, billed on	le, may b	e attached if mor	e space is requir	red) or Cancelled Prior. The ret	ention	/ deductible	
	100,000 is held by Allied Finance Adjuste										
CE	RTIFICATE HOLDER			CANCELLATION							
	MIII IOATE HOLDER		-	ONICELLATION							
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 REPRESE	NTATIVE				
					Solds	<u> </u>					