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TBENNETT DATE (MM/DD/YYYY)

ELITREC-02

,		;Eh	RTI	FICATE OF LIA		ITY INS	SURAN	CE	1	/13/2022	
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						CONTACT Teresa Bennett					
Bru	Brunswick Insurance Agency, Inc. 5309 Transportation Blvd					PHONE FAX (A/C, No, Ext): (A/C, No):					
Cleveland, OH 44125					E-MAIL ADDRESS: tbennett@brunswickcompanies.com						
					INSURER(S) AFFORDING COVERAGE					NAIC #	
			INSURER A : Hanover Insurance Companies					22292			
INS	URED				INSURER B :						
	Elite Recovery Services					INSURER C :					
	111 81 Keith Rd. Beaumont, TX 77713				INSURER D :						
					INSURER E :						
					INSURER F :						
				E NUMBER:	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.											
LTF		ADDL INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	1	IMITS		
								EACH OCCURRENCE DAMAGE TO RENTED	\$		
	CLAIMS-MADE OCCUR							PREMISES (Ea occurrence			
								MED EXP (Any one person			
								PERSONAL & ADV INJUR			
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
								PRODUCTS - COMP/OP A			
								COMBINED SINGLE LIMIT	\$		
	AUTOMOBILE LIABILITY							(Ea accident)	\$		
	OWNED AUTOS ONLY AUTOS							BODILY INJURY (Per perso			
	HIRED AUTOS ONLY AUTOS AUTOS ONLY AUTOS ONLY							BODILY INJURY (Per accid PROPERTY DAMAGE (Per accident)			
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
	UMBRELLA LIAB OCCUR								\$		
	EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	\$		
	DED RETENTION \$	1						AGGREGATE	\$		
	WORKERS COMPENSATION							PER OT	H-		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED?	N / A						E.L. DISEASE - EA EMPLO			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LI			
A	Fidelity / Crime			1849203		2/10/2022	2/10/2023	Client Property	μι φ	1,000,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) This Fidelity / Crime Coverage Policy is written for a Three Year Term, billed on an annual basis until renewed or cancelled prior. The retention / deductible of \$100,000 is held by Allied Finance Adjusters Conference, Inc. as applicable laws will allow.											
CE	ERTIFICATE HOLDER	CANCELLATION									
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.						

AUTHORIZED REPRESENTATIVE

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