118209

CI	ERTIFICATE OF	INSURANCE			ISSUE DATE	
THE	S CERTIFICATE OF	NSURANCE DOES N	OT CONSTITUTE A	ONLY AND CONFERS	B NO RIGHTS UPON THE CERTIFIC TER THE COVERAGE AFFORDED I THE ISSUING INSURER(S), AUTHO	ATE HOLDER. THIS BY THE POLICIES BELOW
IMP SUB	ORTANT: IF THE CE	RTIFICATE HOLDER	IS AN ADDITIONAL IS	INSURED, THE POLICE	Y(IES) MUST BE ENDORSED. IF SU	
PRODUCER				E HOLDER IN LIEU OF SUCH ENDORSEMENT(S).		
PRODUCER TEXAS DEPT. OF INSUKANCE TEXAS DEPT. OF INSUKANCE AUSTIN, TEXAS AUSTIN, TEXAS APPROVED INSURED DEC 292011				INSURER(S) AFFORDING COVERAGE		
				INSURER A:		
				INSURER B:		
				INSURER C:		
				INSURER E:		
COV	ERAGES			MOOKER E.		
RES	SPECT TO WHICH TH REIN IS SUBJECT TO D CLAIMS.	US CEPTIFICATE MA	V DE ISOUED OF 14	Y PERTAIN, THE INS	N ISSUED TO THE INSURED NAME NDITION OF ANY CONTRACT OR C URANCE AFFORDED BY THE POL POLICIES. LIMITS SHOWN MAY HA	THER DOCUMENT WITH ICIES DESCRIBED VE BEEN REDUCED BY
LTR	INSURANCE	NUMBER	EFFECTIVE DATE	POLICY EXPIRATION DA	TE	S
Α	GENERAL LIABILITY				GENERAL AGGREGATE	·
					PRODUCTS-COM/OP AGG.	-
			1		PERSONAL & ADV. INJURY	
					EACH OCCURRENCE	
j		·			DAMAGE PREM RENTED TO YOU	-
				:	MED EXPENSE (Any one person)	
В	25222					
	PERSONAL LIABILITY				COMBINDED SINGLE LIMIT	
					MEDICAL PAYMENTS TO OTHERS	
3	EXCESS LIABILITY				EACH OCCURRENCE	
,					AGGREGATE	1
			•			
- 1						
						1
: -	PROPERTY			·	BUILDING	
		1			CONTENTS	1
					LOSS OF USE	1
)ESCF	RIPTION OF OPERATION	NS / SPECIALTY ITEMS	,			
· · · · · · · · · · · · · · · · · · ·				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 SIGNATURE		
			j			