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	te holder in lieu of such endor	seme	ent(s)		ONTAC	T. Dahart	/ Nicesia		
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The ACORD name and logo are registered marks of ACORD

A       COMMERCIAL GENERAL LIABILITY       ATTRODUCTS - COMPORT       SOUTED STORE       DAMAGE TO RENTED       100         CLAIMS-MADE       OCCUR       NANPO0043512       MED EXP (Any one person)       \$       5         GENL AGGREGATE LIMIT APPLIES PER:       POLICY       PRO- JECT       Loc       2       2       2         AUTOMOBILE LIABILITY       ANY AUTO       \$       2       2       5       2       2         ANY AUTO       ALL OWNED       SCHEDULED AUTOS	ACORD®	CERTI	FIC	ATE OF LIA	BILI	TY IN	ISURA			( <b>MM/DD/YYYY)</b> 7/21/2019
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 nolder in lieu of such endorsement(s).         PRODUCER       R.V. Nuccio & Associates Insurance Brokers, Inc.       NMME <sup>+</sup> Robert V. Nuccio         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (800) 364-2433       FAX, (818) 980-15         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (800) 364-2433       FAX, (818) 980-15         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (818) 980-15       FAX, (818) 980-15         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (818) 980-15       FAX, (818) 980-15         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (818) 980-15       FAX, (818) 980-15         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (818) 980-15       FAX, (818) 980-15         10148 Riverside Drive       Insurer (800) 364-2433       FAX, (818) 980-15       FAX, (818	CERTIFICATE DOES NOT BELOW. THIS CERTIFIC	AFFIRMATIVE	ELY OF	R NEGATIVELY AMEND, DOES NOT CONSTITUT	EXTEN	D OR ALT	ER THE CO	VERAGE AFFORDED B	Y THE	E POLICIES
PRODUCER         R.V. Nuccio & Associates Insurance Brokers, Inc.       CONTACT       Robert V. Nuccio         10148 Riverside Drive       Contact       (add.no):       (818) 980-15         10148 Riverside Drive       Contact       Address:       supression       (add.no):       (818) 980-15         101uca Lake, CA 91602       Insurer       Insurer       Insurer       Insurer       (add.no):       (818) 980-15         101uca Lake, CA 91602       Insurer       Insurer       Insurer       Insurer       (add.no):       (818) 980-15         101uca Lake, CA 91602       Insurer       Insurer <td>the terms and conditions of</td> <td>of the policy, ce</td> <td>ertain p</td> <td>olicies may require an en</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	the terms and conditions of	of the policy, ce	ertain p	olicies may require an en						
R.V. Nuccio & Associates Insurance Brokers, Inc.       NAME:       NOUEIT V. NUCCIO         10148 Riverside Drive       Provide State       Rev. Nuccio & Associates Insurance Brokers, Inc.         10148 Riverside Drive       Nucleation       Rev. Nuccio & Associates Insurance Brokers, Inc.       Provide State       Rev. Nuccio & Company       (818) 980-15         10148 Riverside Drive       Toluca Lake, CA 91602       Insurers : Fireman's Fund Insurance Company       21873         Insurer D       Insurers : Fireman's Fund Insurance Company       21873         400 S. College St       Insurers : National Elife Insurance Company       66869         400 S. College St       Insurers : National Elife Insurance Company       66869         Franklin , KY 42134       Insurers : Ins		such endorsen	nent(s)		CONTAC					
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Initial Region of the regio		Insurance Bro	okers,		(A/C, No,			(A/C, No):	(81	8) 980-1595
INSURER A: Fireman's Fund Insurance Company     21873       INSURED       INSURER B: Nationwide Life Insurance Company     66869       Franklin-Simpson High School Cheer Boosters     Insurer B: Nationwide Life Insurance Company     66869       400 S. College St       Franklin, KY 42134       INSURER E:       COVERAGES       CERTIFICATE NUMBER:       REVISION NUMBER:       THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ADOVE POR THE POLICY PERIC       INSURER F:       THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ADOVE POR THE POLICY PERIC       INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERM EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PHA DUCLIES UNTS       INSURANCE INTY MAY REQUIRE MART       VPOLICY PERIC       MODI_SUBR       ADDI_SUBR       POLICY NUMBER       VPOLICY PERIC       INSURANCE INTY SHOWN MAY HAVE BEEN REDUCED BY THE POLICY PERIC       COMMERCIAL CABLETY       A DOL_SUBR       COMMERCIAL CABLELANT       VPOLICY PERIC       VPOLICY P				A RVNA RVN	ADDRESS				RVN	A RVNA
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400 S. College St Franklin , KY 42134       Insurer D: Insurer E: Insurer E:       Insurer D: Insurer E:         COVERAGES       CERTIFICATE 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 PERIC INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH TH EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERM EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.         INSR       TYPE OF INSURANCE       ADDL SUBR INSR       POLICY NUMBER       POLICY EFF (MM/DD/YYY)       POLICY EFF MM/DD/YYY)       POLICY EFF MM/DD/YYY)       IMMTS         A       GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY       ✓       XPK80991558 NANPO0043512       8/8/2019       8/8/2020       EACH OCCURRENCE       \$       1,000 MED EXP (Any one person)       \$         GENL AGGREGATE LIMIT APPLIES PER: V POLICY       JECT       Loc       \$       COMBINED SINCLE LIMIT       \$         AUTOMOBILE LIABILITY ALL OWNED ALL OWNED HIRED AUTOS       AUTOMOSHIE LIABILITY ANY AUTO ALL OWNED HIRED AUTOS       SCHEDULED AUTOMOSHIE LIABILITY       S       BODILY INJURY (Per person) \$       S         HIRED AUTOS       AUTOMOSHIE LIABILITY HIRED AUTOS       AUTOMAGE       S       PROPERTY DAMAGE       S		chool Cheer B	onster				Mide Life Ins		DVN	00009
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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

## SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Franklin-Simpson High School
430 South College
Franklin , KY 42134
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

**A.** In the performance of your ongoing operations; or

**B.** In connection with your premises owned by or rented to you.