

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

If SURGCATION IS WAIVED, subject to the terms and conditions of the policy, certain policy, and policy, certain policy, porting policy, policy, certain polic	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.										
Table Torustion       Material State Geneview MO 63670         Material Salinte Geneview MO 63670       Material State Stat											
890 ROZIER STreet	PRODUCER										
Sainte Genevieve MO 63670  Sector 2						PHONE (A/C. No. Ext): 573-883-7446 (A/C. No): 573-883-3981					
NUMBER         NUMBER         NUMBER         NUMBER           NUMBER         ADJ Baseball, LLC dba Rawlings Tigers         ADJ Rawlings Tigers		E-MAIL									
Insure A: CINCINNAT INSURANCE COMPANY         10977           ADJANASE OT ADJ Baseball, LLC dba Rawlings Tigers         ADJANASE OT Insure :         Insure ::         10977           ADJANASE OT ADJ Baseball, LLC dba Rawlings Tigers         ADJANASE OT Insure ::         Insure :::         Insure :::         Insure :::         Insure :::         Insure ::::::::::::::::::::::::::::::::::::						INSURER(S) AFFORDING COVERAGE NAIC #					
Naukacon 1801Base Dil, LLC dos Rawlings Tigers 1801Baseds Avenue         ADUASe of Insurers 1: MILLOELPHIA INSURANCE COMPANY         6777           1801Base Dil, LLC dos Rawlings Tigers 1801Bads Avenue         Imsurers 1: MILLOELPHIA INSURANCE COMPANY         6777           Issurers 1: MILLOELPHIA INSURANCE COMPANY         Imsurers 1: MILLOELPHIA INSURANCE COMPANY         6777           Issurers 1: MILLOELPHIA INSURANCE LISTED BUCK To MUMBER: 1454710036         REVISION NUMBER: 1454710036         REVISION NUMBER: 1454710036           COVERAGES         CERTIFICATE NUMBER: 1454710036         REVISION NUMBER: 1454710036         REVISION NUMBER: 1454710036           COVERAGES         CERTIFICATE NUMBER: 1454710036         REVISION NUMBER: 1454710036         REVISION NUMBER: 1454710036           COVERAGES         COVERAGE ASCIENCE DIVERSION NUM HAR RESPECT TO WHICH THE INSURANCE AFRONDED BY THE POLICIES BUCKTON THE THE NUMBER SUBJECT TO ALL THE TENDE SCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN NAM HAR RESPECT TO WHICH THE TENDE SCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN NAM HAR RESPECT TO WHICH THE TENDE SCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN NAM HAR RESPECT TO WHICH DEVELOPMENTS.         S1000.000           CLANS MORE         COURS ADVINUE         S1000.000         MEDICED WT ADVINUE         S1000.000           CLANS MORE         COURS ADVINUE         S1000.000         MEDICED WT ADVINUE         S1000.000           COURS ADVINUE         SCHEDULA BAR         COURS ADVINUE         S100						•••					
ADJ Baseball, LLC dba Rawlings Tigers     Insurers       Chesterfield MO 63005     Insurers       Mainte Baseball, LLC dba Rawlings Tigers     Insurers       Coverages     Certificate NUMBER: 1454710036       This Is to CERTIFY TART THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED To THE INSURED NUMBER IS INSURED TO ALL THE INSURE NOT HERE POLICY PERIOD       This Is to CERTIFY TART THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED To THE INSURED NUMBER AND BOOMED AND AND ADVESTIGATE NUMBER ISSUED TO ALL THE INSURE NOT HERE ISSUED TO ALL THE TERMS       MOICATED NAME CONTINUED AND RECORDER TO THE INSURE NOT HERE IN ISSUED TO ALL THE TERMS       Mainter Contract of Mainter And Policies The Insurement of the Insurement of ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter And Policies The Insurement of ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter And Policies The Insurement of ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Contract of Mainter Admed ADMED ABOVE FOR THE POLICY PERIOD       Mainter Admed ADMED ABOV	INSURED ADJBASE-01										
Insurance     Insurance <th< td=""><td colspan="5">ADJ Baseball, LLC dba Rawlings Tigers</td><td colspan="5"></td></th<>	ADJ Baseball, LLC dba Rawlings Tigers										
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COVERAGES         CENTIFICATE NUMBER: 1464710036         REVISION NUMBER:           THIS IS TO CENTIFY THAT THE POLICIES OF INSURANCE LISTED EDUCI MANE BEEN ISSUED TO THE INSURED NUMBER AND CONTRACT OR OTHER DOCUMENT WITH RESPECT TO ANLITHE TENDE CENTIFICATE MAY BE ISSUED OR MAY PERTIN. THE NUMBER NANCE 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 PAD LOCIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD LOCIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD LOCIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD LOCIES DESCRIBED FREEN IS SUBJECT TO ALL THE TERMS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD LOCIES DESCRIBED FREENERS IS I 000,000 PROVIDED INTO ANY AND INTO ANY											
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LTR       TYPE OF NSURANCE       INSQ MyO       POLICY NUMBER       (MMODAYYY)       MUMDAYYY)       LUIT'S         A       X       COMMERCIA GENERAL INAULTY       Y       FTD 0489975       1/1/2022       1/1/2022       1/1/2023       ECH OCCURRENCE)       \$1.000.000         GENERAL AGGREGATE LIMIT APPLIES PER:       POLICY       PRESONAL & ADVIDIANTY       S       S       S         O_OTHER:       A       AVTOMOBILE LABILITY       S       ETD 0489975       1/1/2022       1/1/2022       COMBINED SINCLE LIMIT       S       S         A       AVTOMOBILE LABILITY       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S       S	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.										
CLAIMS MADE       X       CCUR       J. 1000.000         GENT, AGGREGATE       S. 000.000       PREMISES IS CONTROL & ADV INUIRY       \$1.000.000         GENT, AGGREGATE       LANT APPLIES PER:       GENT, AGGREGATE       S. 000.000         GENT, AGGREGATE       LANT APPLIES PER:       GENT, AGGREGATE       S. 000.000         GENT, AGGREGATE       LANT APPLIES PER:       FTD 0489975       1/1/2022       I/1/2023       COMPLE S. 000.000         A AUTOMOBILE LABILITY       ETD 0489975       1/1/2022       I/1/2023       COMPLE S. 000.000       BODLY INUIRY (Per period) \$         A AUTOMOBILE LABILITY       ETD 0489975       1/1/2022       I/1/2023       COMPLE S. 000.000         MATATOS ONLY       X       AUTOS ONLY       X       SCHEDULED       S         OWNED       X       AUTOS ONLY       X       AUTOS ONLY       S         MATOS ONLY       X       AUTOS ONLY       X       S       S         MODEWNEND       X       CCUR       S       S       S       S         MODEWNEND       X       AUTOS ONLY       X       S       S       S       S         MODEMONEY       X       AUTOS ONLY       X       S       S       S       S       S	LTR TYPE OF INSURANCE	INSD		POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S		
A       Multiple Control Conternation Control Content Control Contenter Control Control Contro		Y		ETD 0489975		1/1/2022	1/1/2023			,	
A       Automodel Libration       PERSONAL & ADV INJURY       \$1,000,000         GENL AGGREGATE LIMIT APPLIES PER:       POLICY       PEG       \$3,000,000         OTHER:       Loc       PRODUCTS: COMPOD AGG       \$3,000,000         A       Automodel Libration       \$1,000,000       \$         OWNED       Automodel Libration       \$1,000,000       \$         AUTOMODEL LIBRITY       ETD 0489975       1/1/2022       1/1/2023       BOOLLY INJURY (Per presso)       \$         A AUTOMODEL LIBRITY       AUTOS ONLY       Xuitos ONLY       Autos Vieted       \$       \$         A AUTOMODEL LIBRITY       ETD 0489975       1/1/2022       1/1/2023       BOOLLY INJURY (Per presso)       \$         BOOLLY INJURY (Per academ)       \$       \$       \$       \$       \$       \$         A       X       UMBRELLALIAB       Coccurr       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$	CLAIMS-MADE X OCCUR									,	
GENL AGGREGATE LIMIT APPLIES PER:       GENERAL AGGREGATE       \$ 3,000,000         OTHER:       LOC       PROUTS - COMPORAGE       \$ 3,000,000         OTHER:       S       COMBINED SINCLE LIMIT       \$         A AUTOMOBILE LIABILITY       ETD 0489975       1/1/2022       1/1/2023       COMBINED SINCLE LIMIT BODILY INULRY (Per person)       \$         A AUTOMOBILE LIABILITY       SCHEDULED AUTOS ONLY       SCHEDULED AUTOS ONLY       SCHEDULED AUTOS ONLY       SCHEDULED AUTOS ONLY       S         A XUMBRELLA LIAB       CLAIMS-MADE       ETD 0489975       1/1/2022       1/1/2023       EACH OCCURRENCE \$ 1,000,000         A XUMBRELLA LIAB       CLAIMS-MADE       ETD 0489975       1/1/1/2022       1/1/1/2023       EACH OCCURRENCE \$ 1,000,000         A XD DEPERTY DAWAGE       S       S       S       S       S         MOREKER SCHERES COMPERTS TOM AND EXPLOYERS'I LIABILITY       N/A       EL. CACH ACCIDENT \$       S         MOREKER SCHERESCHTONS IN HOU       PHPA093666       1/1/1/2022       1/1/1/2023       EACH ACCIDENT \$         B Participant Medical       PHPA093666       1/1/1/2022       1/1/1/2023       PECAHACOLORENT \$         DESCRIPTION OF OPERATIONS / UEHLLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       10.000         Location:: <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>· · · · /</td> <td></td> <td></td>								· · · · /			
POLICY       PRODUCTS - COMPIOP AGG \$ 3,000,000         OTHER:       FTD 0489975         A AUTOMOME LUABILITY       ETD 0489975         ANY AUTO       BODILY INURY (Per person) \$         OWNED       SCHEDULED         ANY AUTO       BODILY INURY (Per person) \$         OWNED       AVTOM NURY (Per person) \$         ANY AUTO       AUTOS ONLY         ANY AUTOS ONLY       AUTOS ONLY         AUTOS ONLY       AUTOS ON											
PRODUCY       JECT       DOC       PRODUCY       JECT       DOC         OTHER:       ETD 0489975       1/1/2022       COMBINED SINGLE LIMIT       \$1,000,000         ANY AUTO       SCHEDULED       AUTOS ONLY       SCHEDULED       SCHEDULED         AVTOS ONLY       AUTOS ONLY       AUTOS ONLY       SCHEDULED       SCHEDULED         AVTOS ONLY       AUTOS ONLY       AUTOS ONLY       SCHEDULED       SCHEDULED         AVTOS ONLY       AUTOS ONLY       AUTOS ONLY       SCHEDULED       SCHEDULED         AVATOS ONLY       AUTOS ONLY       SCHEDULED       SCHEDULED       SCHEDULED         AVATOS ONLY       AUTOS ONLY       CLAIMS-MADE       SCHEDULED       SCHEDULED         DED       RETENTON \$       CLAIMS-MADE       SCHEDULED       SCHEDULED       SCHEDULED         WORKERS COMPERSTAINA       N/A       SCHEDULED       SCHEDULED       SCHEDULED       SCHEDULED       SCHEDULED         Westeschounder       <								GENERAL AGGREGATE			
A AUTOMOSEL LABILITY       ETD 0489975       1/1/2022       1/1/2023       COMENDED SINGLE LIMIT BOOLY INJURY (Per person) \$         ANY AUTO ANY AUTO ANY AUTO ANY CONCEPTIONE AUTOS ONLY AUTOS ONCE AUTOS ONLY AUTOS ONLY AUTOS								PRODUCTS - COMP/OP AGG	. ,	,000	
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OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY A				ETD 0489975		1/1/2022	1/1/2023	(Ea accident)		,000	
AUTOS ONLY       AUTOS NULY       AUTOS NULY       AUTOS NULY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       B         A       X       UMBRELLA LIAB       X       OCCUR       ETD 0489975       1/1/2022       1/1/2023       EACH OCCURRENCE       \$1,000,000         A       X       UMBRELLA LIAB       X       OCCUR       CLAIMS-MADE       S       AGGREGATE       \$1,000,000         B       DED       RETENTION S       Influence       S       Influence       S       Influence       S         MORGERES COMPERSATION       N/A       Stature       Influence       S       Influence       Influence       Influence       Influence       S       Influence       Influence       Influence       Influence       Influence       Influence       Influence       Influence       In								BODILY INJURY (Per person)	\$		
A JUTOS ONLY       AUTOS ONLY       Image: content of the second content of the sec	AUTOS ONLY AUTOS							, ,	\$		
A       X       UMBRELLA LIAB       X       OCCUR       ETD 0489975       1/1/2022       1/1/2023       EACH OCCURRENCE       \$ 1,000,000         DED       RETENTION S       CLAIMS-MADE       S       AGREGATE       \$ 1,000,000         WORKERS COMPENSATION       AMD EMPLOYERS' LABILITY       Y/N       N/A       ELL CACH ACCIDENT       \$         MODE MPLOYERS' COMPENSATION       N/A       ELL DISEASE - EA EMPLOYEE \$       ELL DISEASE - FAIL       \$         MODE MPLOYERS' LABILITY       Y/N       N/A       ELL DISEASE - FAIL       \$       \$         MODE MPLOYERS' LABULITY       Y/N       N/A       ELL DISEASE - FAIL       \$       \$         MODE MPLOYERS' LABULITY       Y/N       N/A       ELL DISEASE - FAIL       \$       \$         MODE MPLOYERS' LABULITY       Y/N       N/A       ELL DISEASE - FAIL       \$       \$         B       Participant Medical       PHPA0938666       1/1/2022       1/1/2023       Per Occurrence       10,000         DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       Location: 203B Ramsey Lane, Ballwin, MO 63021       1       1       1       1       1       1       1       1       1       1       1       1								PROPERTY DAMAGE (Per accident)	\$		
EXCESS LIAB       CLAIMS-MADE         DED       RETENTION \$         AGGREGATE       \$ 1,000,000         AGGREGATE       \$ 1,000,000         AND EMPLOYERS LIABLITY       Y/N         ANYPROPRIETOR/PARTNER/EXECUTIVE       N/A         DEGCRIPTION OF OPERATIONS / LOCATIONS									\$		
DED       RETENTIONS       \$ 1,000,000         WORKERS COMPENSATION       \$ 1,000,000         AND DEMLOYERS' LIABILITY       \$ 1,000,000         AND DEMLOYERS' LIABILITY       Y/N         ANYPROPRIETOR/PARTNERYSCUTVE       Y/N         ANYPROPRIETOR/PARTNERYSCUTVE       Y/N         ANYPROPRIETOR/PARTNERYSCUTVE       Y/N         ANYPROPRIETOR/PARTNERYSCUTVE       Y/N         ANYPROPRIETOR/PARTNERYSCUTVE       Y/N         ANYPROPRIETOR/PARTNERYSCUTVE       Y/N         ANY A       EL. DISEASE - EA EMPLOYEE S         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)         Location:       203B Ramsey Lane, Ballwin, MO 63021         The above General Liability policy provides Automatic Additional Insured coverage to the certificate holder. A copy of which is available upon request.         CERTIFICATE HOLDER       CANCELLATION         United States Specialty Sports Association, Inc., USSSA, LLC       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORI         THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACORDANCE WITH THE POLICY PROVISIONS.       ACORDANCE WITH THE POLICY PROVISIONS.	A X UMBRELLA LIAB X OCCUR			ETD 0489975		1/1/2022	1/1/2023	EACH OCCURRENCE	\$ 1,000	,000	
WORKERS COMPENSATION         OTH-           AND EXPROPENSERS CLUBED?         Y/N           ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICE/RMMERE EXECUTIVE (Mandatory in NH)         Y/N           If yes, describe under DESCRIPTION OF OPERATIONS below         N/A           B         Participant Medical         PHPA093666           1/1/2022         1/1/2023           Per Occurrence         10,000           DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)           Location:         203B Ramsey Lane, Ballwin, MO 63021           The above General Liability policy provides Automatic Additional Insured coverage to the certificate holder. A copy of which is available upon request.           CERTIFICATE HOLDER         CANCELLATION           United States Specialty Sports Association, Inc., USSSA, LLC and their affiliated entities, officers, directors         SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE	EXCESS LIAB CLAIMS-MAD							AGGREGATE	\$ 1,000	,000	
AND EMPLOYER'S LABILITY       Y/N       N/A       Image: Constraint of the second se	DED RETENTION \$								\$		
ANYPROPRIETOR/PARTNER/EXECUTIVE       Image: Constraint of the second of t								PER OTH- STATUTE ER			
If wandatory in NH)       EL. DISEASE - EA EMPLOYEE       S         If wandatory in NH)       DESCRIPTION OF OPERATIONS below       EL. DISEASE - POLICY LIMIT       S         B       Participant Medical       PHPA093666       1/1/2022       1/1/2023       Per Occurrence       10,000         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       Location:       203B Ramsey Lane, Ballwin, MO 63021         The above General Liability policy provides Automatic Additional Insured coverage to the certificate holder. A copy of which is available upon request.         CERTIFICATE HOLDER       CANCELLATION         United States Specialty Sports Association, Inc., USSSA, LLC       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORI         THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORI		N/A						E.L. EACH ACCIDENT	\$		
DESCRIPTION OF OPERATIONS below       EL. DISEASE - POLICY LIMIT       \$         B       Participant Medical       PHPA093666       1/1/2022       1/1/2023       Per Occurrence       10,000         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES       (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       10,000         DescRIPTION OF OPERATIONS / LOCATIONS / VEHICLES       (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       10,000         Location:       203B Ramsey Lane, Ballwin, MO 63021       The above General Liability policy provides Automatic Additional Insured coverage to the certificate holder. A copy of which is available upon request.         CERTIFICATE HOLDER         CANCELLATION         United States Specialty Sports Association, Inc., USSSA, LLC and their affiliated entities, officers, directors	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)         Location:       203B Ramsey Lane, Ballwin, MO 63021         The above General Liability policy provides Automatic Additional Insured coverage to the certificate holder. A copy of which is available upon request.         CERTIFICATE HOLDER       CANCELLATION         United States Specialty Sports Association, Inc., USSSA, LLC and their affiliated entities, officers, directors       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
Location: 203B Ramsey Lane, Ballwin, MO 63021         The above General Liability policy provides Automatic Additional Insured coverage to the certificate holder. A copy of which is available upon request.         CERTIFICATE HOLDER       CANCELLATION         United States Specialty Sports Association, Inc., USSSA, LLC and their affiliated entities, officers, directors       SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFOR	B Participant Medical			PHPA093666		1/1/2022	1/1/2023	Per Occurrence	10,00	0	
United States Specialty Sports Association, Inc., USSSA, LLC and their affiliated entities, officers, directors	Location: 203B Ramsey Lane, Ballwin, MO 63021										
United States Specialty Sports Association, Inc., USSSA, LLC and their affiliated entities, officers, directors						CANCELLATION					
I AUTHORIZED REPRESENTATIVE	LLC and their affiliated entities, officers, directors										
5800 Stadium Parkway Melbourne FL 32940	servants and employees 5800 Stadium Parkway Melbourne FL 32940		AUTHO	© 1988-2015 ACORD CORPORATION. All rights reserved.							

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