

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/27/2025

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.

	SUBROGATION IS WAIVED, subject his certificate does not confer rights to							require an endorsement	. A st	atement on	
PRODUCER						CONTACT NAME:					
Lakenan					PHONE (A/C, No, Ext): 573-883-7446 (A/C, No): 573-883-3981						
890 Rozier Street Sainte Genevieve MO 63670						E-MAIL ADDRESS: coi@lakenan.com					
						INSURER(S) AFFORDING COVERAGE				NAIC#	
						INSURER A : PHILADELPHIA INSURANCE COMPANY				6777	
ADJBASE-01 ADJ Baseball, LLC DBA Rawlings Tigers NTJ Baseball LLC/Balls-N-Strikes LLC/44 Baseball LLC 18018 Eads Avenue Chesterfield MO 63005-1101					INSURER B:					0	
					INSURER C:						
					INSURER D:						
						INSURER E :					
					INSURER F:						
COVERAGES CER			CATE	NUMBER: 504826129	REVISION NUMBER:						
IN C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY IXCLUSIONS AND CONDITIONS OF SUCH	QUIF PERT POLI	REMEI AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN' ED BY	Y CONTRACT	OR OTHER DESCRIBED	DOCUMENT WITH RESPEC	CT TO	WHICH THIS	
LTR		INSD	SUBR WVD			(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT			
Α	X COMMERCIAL GENERAL LIABILITY			PHPK2632045		1/1/2025	1/1/2026	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000		
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 500,000		
								MED EXP (Any one person)	\$0		
								PERSONAL & ADV INJURY	\$ 1,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:   X   POLICY   PRO-   LOC   LOC							GENERAL AGGREGATE	\$3,000	·	
								PRODUCTS - COMP/OP AGG	\$ 3,000	,000	
Α	OTHER: AUTOMOBILE LIABILITY			PHPK2632045		1/1/2025	1/1/2026	COMBINED SINGLE LIMIT	\$1,000	000	
, ,	ANY AUTO			1111 N2002040		1/1/2023	17 172020	(Ea accident) BODILY INJURY (Per person)	accident)		
	OWNED SCHEDULED							BODILY INJURY (Per accident)	\$		
	AUTOS ONLY HIRED X HIRED X NON-OWNED							PROPERTY DAMAGE	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
Α	X UMBRELLA LIAB X OCCUR			PHUB892173		1/1/2025	1/1/2026	EACH OCCURRENCE	\$ 3,000	.000	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 3,000	•	
	DED X RETENTION \$ 10,000								\$	-	
	WORKERS COMPENSATION							PER OTH- STATUTE ER			
	ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
A A A	Accident Medical Expense Abusive Conduct Liability Participant Legal Liability			PHPA150833 PHPK2632045 PHPK2632045		1/1/2025 1/1/2025 1/1/2025	1/1/2026 1/1/2026 1/1/2026	Per Occurrence Aggregate Aggregate	100,0 3,000 1,000	,000	
ΑU	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI TOMATIC ADDITIONAL INSURED: OW PROMOTERS SUBJECT TO A WRITTE	<b>NER</b>	S AN	D / OR LESSORS OF PRI	le, may bo	e attached if more S,LESSORS (	e space is require OF LEASED E	ad) EQUIPMENT, SPONSOR	S OR		
CERTIFICATE HOLDER						CANCELLATION					
Washtenaw CC 4800 E. Huron River Dr						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Ann Arbor MI 48105						AUTHORIZED REPRESENTATIVE					

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

## ADDITIONAL INSURED: OWNERS AND / OR LESSORS OF PREMISES, LESSORS OF LEASED EQUIPMENT, SPONSORS OR CO-PROMOTERS

This endorsement modifies insurance provided under the following:

## **COMMERCIAL GENERAL LIABILITY COVERAGE PART**

This policy is amended to include as an additional Insured any person or organization of the types designated below, but only with respect to liability arising out of your operations:

- 1. Owners and / or lessors of the premises leased, rented, or loaned to you, subject to the following additional exclusions:
  - This insurance applies only to an "occurrence" which takes place while you are a tenant in the premises;
  - b. This insurance does not apply to "bodily injury" or "property damage" resulting from structural alterations, new construction or demolition operations performed by or on behalf of the owner and / or lessor of the premises;
  - c. This insurance does not apply to liability of the owners and / or lessors for "bodily injury" or "property damage" arising out of any design defect or structural maintenance of the premises or loss caused by a premises defect.

With respect to any additional insured included under this policy, this insurance does not apply to the sole negligence of such additional insured.

- 2. Lessor of Leased Equipment, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person(s) or organization(s) subject to the following additional exclusions:
  - a. This insurance does not apply to any "occurrence" which takes place after the equipment lease expires.
- 3. Sponsors
- 4. Co-Promoters