

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/09/2016

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(les) must 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)

certificate holder in lieu of such endorsement(s). PRODUCER Speed Insurance Agency PHONE (805)988-9850(A/C, No) (805) 604-9803 (A/C, No, Ext): E-MAIL 1000 Town Center Dr ADDRESS john.speed@johnspeed.net Oxnard, CA 93036 INSURER(S) AFFORDING COVERAGE NAIC# AA-1128623 Lloyds Syndicate 2632 INSURER A Ventura County Youth Track Conference INSURED INSURER B Ojai RoadRunners TC INSURER C INSURER D INSURER E INSURER F:

COVERAGES

CERTIFICATE 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.

INSR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS	
LIK	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR	INSD	VVVD				EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
A	GEN'L AGGREGATE LIMIT APPLIES PER:	Y		SP-10002-A1215955 SP-10002-A1215955		01/01/2018	MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE	\$ 1,000,000 \$ 2,000,000
	X POLICY PRO- OTHER: LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	AUTOMOBILE LIABILITY  ANY AUTO ALL OWNED SCHEDULED	Y		SP-10002-A1215955	01/01/2017	01/01/2018	COMBINED SINGLE LIMIT (Ea accident)  BODILY INJURY (Per person)	\$ 1,000,000
A	AUTOS AUTOS AUTOS NON-OWNED AUTOS						BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE						EACH OCCURRENCE AGGREGATE	\$
	DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH-	\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	N/A					E.L. EACH ACCIDENT  E.L. DISEASE - EA EMPLOYE	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$
A	Participant Accident			SP-10002-A1215955	01/01/2017	01/01/2018	\$25,000 Exces	s Medical

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Youth Track & Field

Certificate holder listed below is named as additional insured per attached CG 20 26 07 04

CERTIFICATE HOLDER

CANCELLATION

Ojai Unified School District, its officers, employees, agents and volunteers
PO Box 878
Ojai, CA 93024

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

© 1988-2014 ACORD CORPORATION. All rights reserved.

Policy Number: SP-10002-A1215955

## 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)						
Ojai Unified School District 414 E Ojai Ave Ojal, CA 93023						
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.