

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/13/2025

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. 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).

PRODUCER		CONTACT Becky Ogg			
Evansville / AssuredPartners NL 120 N. Fulton Ave., Suite A			No):(812) 485-2561		
Evansville, IN 47710		E-MAIL ADDRESS: becky.ogg@assuredpartners.com			
		INSURER(S) AFFORDING COVERAGE	NAIC#		
		INSURER A: Colony Insurance Company	39993		
INSURED		INSURER B : Selective Casualty Insurance	14376		
Electronics Research	, Inc.	INSURER C: Carolina Casualty Insurance Company			
7777 Gardner Road		INSURER D : Starstone Specialty Insurance Comp	any 44776		
Chandler, IN 47610		INSURER E :			
		INSURER F:			
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 PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS

INSF	2	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMIT	rs	
Α		COMMERCIAL GENERAL LIABILITY			(11111/20/1111)	Tunn Service	EACH OCCURRENCE	\$	1,000,000
		CLAIMS-MADE X OCCUR		103GL019267703	1/15/2025	1/15/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000
							MED EXP (Any one person)	\$	10,000
							PERSONAL & ADV INJURY	\$	1,000,000
	GEN	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000
		POLICY X PRO-					PRODUCTS - COMP/OP AGG	\$	2,000,000
_	ļi	OTHER:						5	
В	-	OMOBILE LIABILITY					COMBINED SINGLE LIMIT [Ea accident]	\$	1,000,000
	X	X ANY AUTO		S 2550864	1/15/2025	1/15/2026	BODILY INJURY (Per person)	\$	
		OWNED SCHEDULED AUTOS ONLY				İ	BODILY INJURY (Per accident)	\$	
	X	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident	\$	
								\$	
Α		UMBRELLA LIAB X OCCUR		XS175124	1/15/2025	1/15/2026	EACH OCCURRENCE	\$	5,000,000
	X	EXCESS LIAB CLAIMS-MADE	- 1				AGGREGATE	\$	5,000,000
	DED X RETENTION \$ 0						\$		
	WOR	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					X PER OTH-		
	ANY PROPRIETOR/DARTNER/EYECUTIVE		CCWC339304	1/15/2025	1/15/2026	E.L. EACH ACCIDENT	\$	1,000,000	
		(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	DÉSC	describe under CRIPTION OF OPERATIONS below				_	E.L. DISEASE - POLICY LIMIT		1,000,000
D	Exc	ess Liability		E79591243ALI	1/15/2025	1/15/2026			5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
CG2010 Additional Insured-owners, lessees or contractors-scheduled person or organization-Blanket. CG2026 Additional Insured-designated person or organization-Blanket. CG2033 Additional insured-owners, lessees or contractors-automatic status when required in construction agreement with you. CG2037 Additional Insured-owners lessees or contractors-Completed Operations-Blanket. CA7916 ElitePac Commercial Auto Extension Endorsement-includes Blanket Additional Insureds under a written contract & Blanket Waiver of Subrogation under a written contract. CG2404 Waiver of Transfer of Rights of Recovery Against Others to Us-as requested by written contract. WC000313 Waiver of Right to Recover from others.

CG2010 Additional Insured-owners, lessees or contractors-scheduled person or organization-Blanket. CG2026 Additional Insured-designated person or SEE ATTACHED ACORD 101

CERTIFICATE HOLDER CANCELLATION 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 Day La Z. By

BOGG

LOC #: 1



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY		NAMED INSURED			
Evansville / AssuredPartners NL		Electronics Research, Inc. 7777 Gardner Road			
POLICY NUMBER		Chandler, IN 47610			
SEE PAGE 1					
CARRIER	NAIC CODE				
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1			

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

organization-Blanket. CG2033 Additional insured-owners, lessees or contractors-automatic status when required in construction agreement with you. CG2037 Additional Insured-owners lessees or contractors-Completed Operations-Blanket. CAT353 Business Auto Extension Endorsement-includes Blanket Additional Insureds under a written contract & Blanket Waiver of Subrogation under a written contract, CG2404 Waiver of Transfer of Rights of Recovery Against Others to Us-as requested by written contractor. WC000313 Waiver of Right to Recover from others.