

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/26/2022

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 the terms and conditions of the policy certificate holder in lieu of such endors	, certain	policies may require an en	oolicy(ies) must be dorsement. A stat	e endorsed. tement on th	If SUBROGATION IS WA	IVED, subject to infer rights to the
PRODUCER			CONTACT NAME: Lockton Affinity, LLC			
Lockton Affinity, LLC			PHONE (A/C, No, Ext): 800-496-0288 FAX (A/C, No): 913-652-7599 E-MAIL ADDRESS:			
P. O. Box 879610 Kansas City, MO 64187-9610						NAIC#
Ransas City, NO 04187-9010			INSURER A: Nova Casualty Co			42552
INSURED			INSURER B:			42302
State Council of Nevada			INSURER C:			
2201 S Monto Cristo May			INSURER D:			
2201 S Monte Cristo Way			INSURER E :			
Las Vegas, NV 89117			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 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 LTR TYPE OF INSURANCE	INSD WVD		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	i
A X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	x	LFR-GL-29000000-01	07/14/2022	07/14/2023	DAMAGE TO DENITED	\$1,000,000 \$1,000,000
					MED EXP (Any one person)	\$ 20000
					PERSONAL & ADV INJURY	\$1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$3,000,000
X POLICY PRO-					PRODUCTS - COMP/OP AGG	\$3,000,000
OTHER:						\$
A AUTOMOBILE LIABILITY		LFR-GL-29000000-01	07/14/2022	07/14/2023	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
ANY AUTO						\$
ALL OWNED SCHEDULED AUTOS					5/ 12	\$
X HIRED AUTOS X AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
						\$
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
DED RETENTION\$						\$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER	
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	JN/2				E.L. DISEASE - EA EMPLOYEE	\$
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$
A Physical/Sexual Abuse or Molestation Liability		LFR-GL-29000000-01	07/14/2022	07/14/2023	Occurrence Aggregate	\$500,000 \$500,000
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) All Operations. Parish/School/Institution and The Roman Catholic Bishop of Las Vegas and His Successors, A Corporation Sole are listed as an Additional Insured with respects to the General Liability policy as required by written contract.						
CERTIFICATE HOLDER CANCELLATION						
2946245						ANCELLED DECORE
The Roman Catholic Bishop of Las Vegas			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN			
&His Successors	ACCORDANCE WITH THE POLICY PROVISIONS.					

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A Corporation Sole

336 Cathedral Way Las Vegas, NV 89109 AUTHORIZED REPRESENTATIVE