

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 04/29/2022

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 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 AON Risk Services Northeast, Ind Columbus OH Office 445 Hutchinson Avenue Suite 900		CONTACT NAME: PHONE (A/C. No. Ext): E-MAIL ADDRESS:	(866) 283-7122	FAX (A/C. No.): (800) 363-01	.05				
Columbus OH 43235 USA			INSURER(S) AFFORDING	NAIC#					
INSURED		INSURER A:	United Educators In	ns, a Reciprocal RRG	10020				
The Ohio State University 1961 Tuttle Park Place. 2nd Floo	l Floor	INSURER B:							
Columbus OH 43210 USA		INSURER C:							
		INSURER D:							
		INSURER E:							
		INSURER F:							
COVERAGES C	ERTIFICATE NUMBER: 57009289359	2	REVIS	ION NUMBER:					
INDICATED. NOTWITHSTANDING ANY	IES OF INSURANCE LISTED BELOW HAV REQUIREMENT, TERM OR CONDITION C AY PERTAIN. THE INSURANCE AFFORDE	F ANY CON	TRACT OR OTHER DOCL	JMENT WITH RESPECT TO	WHICH THIS				

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. Limits shown are as requested										
INSR LTR		TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS		
Α	Χ	COMMERCIAL GENERAL LIABILITY			C0442W	05/01/2022	05/01/2023	EACH OCCURRENCE \$1,000,000		
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED \$1,000,000 PREMISES (Ea occurrence)		
								MED EXP (Any one person)		
								PERSONAL & ADV INJURY		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERALAGGREGATE \$3,000,000			
	Χ	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG		
		OTHER:								
	AU	TOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)		
] ANY AUTO						BODILY INJURY (Per person)		
		OWNED SCHEDULED						BODILY INJURY (Per accident)		
		AUTOS ONLY HIRED AUTOS ONLY ONLY AUTOS NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)		
		AUTOG ONET								
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE		
		EXCESS LIAB CLAIMS-MADE						AGGREGATE		
		DED RETENTION								
		ORKERS COMPENSATION AND						PER STATUTE OTH-		
	AN	MPLOYERS' LIABILITY IY PROPRIETOR / PARTNER / EXECUTIVE						E.L. EACH ACCIDENT		
	(Ma	FICER/MEMBER EXCLUDED? andatory in NH)	N/A					E.L. DISEASE-EA EMPLOYEE		
	lf y DE	es, describe under SCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT		
Α	E8	&O-MPL-Primary			CO442W LPL- Claims Made	05/01/2022	05/01/2023	LPL Each Claim \$1,000,000 Annual Aggregate \$3,000,000		
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)									

Licensed Professional Liability: Policy coverage applies only to students while working offsite in a curriculum required of Ohio State University approved internship, practicum or work study and continuing field work done in relation to same. Coverage includes Licensed Professional Liability for students on a claims-made basis.

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.

The Ohio State University 1961 Tuttle Park Pllace, 2nd Floor Columbus OH 43210 USA

AUTHORIZED REPRESENTATIVE

Aon Prish Services Northeast Inc.