

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/01/2021

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.

this certificate does not confer rights to the certificate holder in lieu of s	he policy, certain policies may require an endo such endorsement(s).	orsement. A statement on		
PRODUCER	CONTACT Laura Craig			
Marsh & McLennan Agency LLC 8144 Walnut Hill Lane, 16th Floor	PHONE (A/C, No, Ext): 972-770-1402	FAX (A/C, No): 972-770-1699		
Dallas TX 75231	E-MAIL ADDRESS: laura.craig@marshmma.com			
	INSURER(S) AFFORDING COVERAGE	NAIC#		
	INSURER A: Evanston Insurance Company	35378		
INSURED BOY Scouts of America, National Council and all of it's affiliates and subsidiaries	INSURER B:			
Suffolk County Council #404	INSURER C:			
7 Scouting Blvd.	INSURER D:			
Medford, NY 11763	INSURER E:			
Access (processors) in an an analysis of the second	INSURER F:			
COVERAGES CERTIFICATE NUMBER: 430155702	REVISION NUM			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HA INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORD EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE	OF ANY CONTRACT OR OTHER DOCUMENT WITH DED BY THE POLICIES DESCRIBED HEREIN IS SUI	RESPECT TO WHICH THIS		
INSR LTR TYPE OF INSURANCE INSD IMAD POLICY NUMBER	POLICY EFF POLICY EXP	I IMITS		

LTR	TYPE OF INSURANCE	INSD WV	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	s
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		MKLV4PBC001681	3/1/2021	3/1/2022	EACH OCCURRENCE DAMAGE TO RENTED	\$1,000,000
						PREMISES (Ea occurrence)	\$1,000,000
				MED EXP (Any one person) PERSONAL & ADV INJURY	\$ 1,000,000		
GEN'L AGGREGATE LIMIT APPLIES PER	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 10.000,000
	POLICY PRO-					PRODUCTS - COMP/OP AGG	
	OTHER:					PRODUCTS - COMPIOP AGG	\$
	AUTOMOBILE LIABILITY				()-	COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO					BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
	DED RETENTION \$	and the same					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N					PER OTH- STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE [N/A				E.L. EACH ACCIDENT	\$
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$
	DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder is named as an additional insured by virtue of a written or oral contract or by the issuance/existence of a permit or certificate of insurance but only with respect to operations by or on behalf of the Insured, or to facilities of, or facilities used by the Insured and then only of the limits of liability specified in such contract for the event specified. Primary and Non-Contributory applies as required by written contract or agreement. Waiver of Subrogation applies when required by written contract or agreement. Sexual Molestation coverage is incorporated in the policy and addressed by endorsment and is subject to the policy period, terms, limits and conditions of the policy. Certificate holders include directors, officers, agents, owners, volunteers, mortgagees and landlords as required by written contract or agreement.

For: All Official Scout Activities

CERTIFICATE HOLDER	CANCELLATION
Smithtown Central School District 26 New York Ave. Smithtown, NY 11787	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

EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY POLICY

It is agreed that the Persons or Entities insured provision is amended to include:

Certificate holder, except a Chartered Organization and/or Participating Organization, is named as an additional insured by virtue of a written or oral contract or by the issuance/existence of a permit or certificate of insurance but only with respect to operations by or on behalf of the insured, or to facilities of, or facilities used by the insured and then only for the limits of liability specified in such contract for the event specified in the permit or certificate of insurance.

Nothing herein shall operate to increase the insurers per occurrence liability limit of \$1,000,000.

Policy Number: MKLV4PBC001681

Insured: Boy Scouts of America, National Council and all of its

affiliates and subsidiaries and all Local Councils and all their

affiliates and subsidiaries and Learning for Life

Effective Date: 03/01/2021

Expiration Date: 03/01/2022