Client#: 1513528 20CAMPBUNI

$ACORD_{\scriptscriptstyle{\mathsf{IM}}}$

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/25/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER McGriff Insurance Services LLC				CONTACT Beth Wilkerson PHONE 040 204 4500 FAX 0007460764				
Post Office Box 13941				PHONE (A/C, No, Ext): 919 281-4500 FAX (A/C, No): 8887468761 E-MAIL ADDRESS: NCCertificateTeam@mcgriff.com				
				ADDRESS: NCCert	ificateTeam	@mcgriff.com		
Durham, NC 27709				INSURER(S) AFFORDING COVERAGE			NAIC #	
919 281-4500				INSURER A : American Casualty Co of Reading PA				20427
INSURED Comphell University				INSURER B:				
Campbell University				INSURER C:				
PO Box 114				INSURER D:				
Buies Creek, NC 27506-0114				INSURER E:				
				INSURER F:				
COVERAGES CERTIFICATE NUMBER:				REVISION NUMBER:				
IN C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY F XCLUSIONS AND CONDITIONS OF SUCH	QUIREMI PERTAIN,	ENT, TERM OR CONDITION O THE INSURANCE AFFORDE ES. LIMITS SHOWN MAY HAV BRI	F ANY CONTRACT C D BY THE POLICIES /E BEEN REDUCED	R OTHER DO	CUMENT WITH RESPECT HEREIN IS SUBJECT TO A MS.	TO WH ALL TH	HICH THIS
INSR LTR		INSR WV		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT		
	COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED	\$	
	CLAIMS-MADE OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
						MED EXP (Any one person)	\$	
						PERSONAL & ADV INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	
	POLICY JECT LOC					PRODUCTS - COMP/OP AGG	\$	
	OTHER:					COMPINED ONIOLE LIMIT	\$	
	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 \$						\$	
	WORKERS COMPENSATION					PER OTH- STATUTE ER		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. DISEASE - EA EMPLOYEE		
	If ves. describe under					E.L. DISEASE - POLICY LIMIT		
Α	Professional Liab		HPG0127300581	06/01/2024	06/01/2025	\$2,000,000 Each Cla		
^	Occurrence Form		111 00127300301	00/01/2024	00/01/2023	\$5,000,000 Aggregate		
Со	CRIPTION OF OPERATIONS / LOCATIONS / VEHI Verage is provided for any studer a curriculum requirement and pur	nt or fac	culty participating in an	internship or pra				
CERTIFICATE HOLDER				CANCELLATION				
Campbell University				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN				

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ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

PO Box 114

Buies Creek, NC 27506

