

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/17/2019

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 the terms and conditions of the policy, certificate holder in lieu of such endors	certa	ain po		• •				•		
PRODUCER					CONTACT NAME:					
Outdoor Underwriters, Inc.					PHONE 1-866-961-4101 FAX A/C, No. Ext): 1-866-961-4101					
140 Stoneridge Drive, Suite 230					E-MAIL ADDRESS: support@outdoorund.com					
Columbia, SC 29210					INSURER(S) AFFORDING COVERAGE				NAIC #	
INSURED					INSURER A: Certain Underwriters at Lloyds, London					
Quality Deer Management Association					INSURER B:					
Hunting Clubs and Landowners					INSURER C:					
P. O. Box 160					INSURER E:					
Bogart, GA 30622					INSURER F:					
COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICIES OF INDICATED. NOTWITHSTANDING ANY REQU CERTIFICATE MAY BE ISSUED OR MAY PER EXCLUSIONS AND CONDITIONS OF SUCH POLICIES	JIREM TAIN, OLICIE	ENT, [†] THE ES. LII	TERM OR CONDITION OF A INSURANCE AFFORDED B' MITS SHOWN MAY HAVE BI	ANY CO Y THE	ONTRACT OR (POLICIES DES EDUCED BY P/	OTHER DOCUI SCRIBED HERE AID CLAIMS.	MENT WITH RESPECT TO	NHICH .	THIS	
	INSR	SUBF WVD	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI		1 000 000	
GENERAL LIABILITY							EACH OCCURRENCE	\$ ¢	1,000,000	
							PREMISES (Ea occurrence) MED EXP (Any one person)	\$ \$	1,000	
A	х		HL0193482		Dec 17, 2019	Aug 01, 2020	PERSONAL & ADV INJURY	\$	EXCLUDED	
						-	GENERAL AGGREGATE	\$	2,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$	1,000,000	
							COMBINED SINGLE LIMIT	\$		
							(Ea accident)	\$		
ANY AUTO ALL OWNED SCHEDULED							BODILY INJURY (Per person)	\$		
AUTOS AUTOS HIRED AUTOS NON-OWNED							BODILY INJURY (Per accident) PROPERTY DAMAGE			
AUTOS							(Per accident)	\$ \$		
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	э \$		
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
DED RETENTION \$								\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N							WC STATU- TORY LIMITS ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$		
(Mandatory in NH) If yes, describe under	N/A						E.L. DISEASE - EA EMPLOYEE	\$		
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (/	Attach	ACORD 101, Additional Remark	s Sche	dule, if more spa	ce is required)				
HUNT CLUB NO.: 40545 HUNT CLUB: Newnans Lake Cypress Preserve LEASED LAND LOCATION: Gainesville, Alachua County,										
Charl es Lesch					FL5600 SE Hawthorne Rd LANDOWNER ADDITIONAL INSURED?: Yes					
18225 N. County Rd225 Gainesville, FL 32609										
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.					
Alachua County Board of County Commissioners,c/o E 408 West University Ave Suite 106 Gainesville, FL 32641					AUTHORIZED REPRESENTATIVE Decaye C. Wille					
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