

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/17/2020

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 be endorsed. If SUBROGATIONIS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confor rights to the cartificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME:				
BIN INSURANCE HOLDINGS LI 46505301 The Hartford Business Service C 3600 Wiseman Blvd San Antonio, TX 78251		PHONE (A/C, No, Ext):	(866) 467-8730	FAX (A/C, No):	(888) 443-6112	
		E-MAIL ADDRESS:				
			INSURER(S) AFFORDING COVERAGE		NAIC#	
INSURED		INSURER A:	Sentinel Insurance Company Ltd.		11000	
JACKSON COMPUTER CONSUL		INSURER B :				
6101 PENN AVE STE 201 PITTSBURGH PA 15206-3956		INSURER C:				
		INSURER D:				
		INSURER E :				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER:	<u> </u>	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	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS	
LTR	COMMERCIAL GENERAL LIABILITY	INSK	WVD		1	10,10,000	EACH OCCURRENCE	\$2,000,000
A	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
	x General Liability						MED EXP (Any one person)	\$10,000
	,			46 SBM IU4116	02/01/2020	02/01/2021	PERSONAL & ADV INJURY	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	1					GENERAL AGGREGATE	\$4,000,000
	POLICY PRO- X LOC					,	PRODUCTS - COMP/OP AGG	\$4,000,000
	OTHER:	ł	'					
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
] '	ANY AUTO		İ				BODILY INJURY (Per person)	
A	ALL OWNED SCHEDULED AUTOS	İ		46 SBM IU4116	02/01/2020	02/01/2021	BODILY INJURY (Per accident)	
	V HIRED V NON-OWNED		ŀ				PROPERTY DAMAGE (Per accident)	
	Autos Autos	ļ	İ				V. G. GOSTON,	
	UMBRELLA LIAB OCCUR	1	<u> </u>		<del> </del>		EACH OCCURRENCE	
	EXCESS LIAB CLAIMS-						AGGREGATE	
İ	DED RETENTION \$	1			İ			
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER OTH-	
	ANY Y/N		1				E.L. EACH ACCIDENT	\$1,000,000
	PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		46 WEC AI7198	08/01/2020	08/01/2021	E.L. DISEASE -EA EMPLOYEE	\$1,000,000
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	]					E.L. DISEASE - POLICY LIMIT	\$1,000,000
	EMPLOYMENT PRACTICES	†	T	40 CDM II I4440	02/04/2020	02/01/2021	Each Claim Limit	\$10,000
A	LIABILITY			46 SBM IU4116	02/01/2020	02/01/2021	Aggregate Limit	\$10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Those usual to the Insured's Operations.	

Jackson Computer Consulting, LLC 6101 Penn Avenue Suite 201

**CERTIFICATE HOLDER** 

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** 

Sugan S. Castaneda

CANCELLATION

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Pittsburgh PA 15206