

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/02/2023

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).

00//504050	OFFICE ATE AUGUSTE 22/22 All Lines	
Glen Mills	PA 19342	INSURER F:
		INSURER E :
40 Regency Plaza		INSURER D:
SAMPLE Exhibitor/EAC		INSURER C: Accident Fund Insurance Company Of America 10166
INSURED		INSURER B: Travelers Indemnity Company 25658
Charlotte	NC 28277	INSURER A: Travelers Property Casualty Company of America 25674
Suite 100		INSURER(S) AFFORDING COVERAGE NAIC #
11215 SAMPLE Rd		E-MAIL SAMPLE@SAMPLE.com
SAMPLE.		PHONE (A/C, No, Ext): (704) 555-1257 FAX (A/C, No):
PRODUCER		CONTACT Whitney SAMPLE
this certificate does not confer no	ints to the certificate holder in fied of such	i endorsement(s).

COVERAGES CERTIFICATE NUMBER: 22/23 All Lines Master 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.

	T	ADDL			POLICY EFF	POLICY EXP	ī	
INSR LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	
А	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR			P-630-8K066011-TIL-22	05/01/2022	05/01/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 1,000,000
							MED EXP (Any one person)	\$ 10,000
		Y						\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:							\$
В	AUTOMOBILE LIABILITY			810-9M776151-22-43-G	05/01/2022	05/01/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
А	★ UMBRELLA LIAB ★ OCCUR OCCUR			CUP-1S596407-22-43	05/01/2022	05/01/2023	EACH OCCURRENCE	\$ 10,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 10,000,000
	DED RETENTION \$ 10,000							\$
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			100018916 (Cov. applies in NY)	05/01/2022	05/01/2023	➤ PER OTH- STATUTE ER	
	ANY PROPRIETOR/PARTNER/EYECLITIVE	N/A					E.L. EACH ACCIDENT	\$ 1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
А	Leased/Rented Equipment						Limit:	\$30,000
	Louisea/Nortica Equipment			P-630-8K066011-TIL-22	05/01/2022	05/01/2023	Deductible:	\$2,500

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

ETA, its officers, directors and agents, and Georgia World Congress Center are hereby named as additional insureds. 4/21/2023-4/30/2023, including move in and move out in Atlanta, GA.

CERTIFICATE HOLDER		CANCELLATION			
Electronic Transactions Association 1101 16th St NW		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			
Suite 402	DC 20036				
Washington I		Deborah B. Gravely			