



CERTIFICATE OF LIABILITY INSURANCE

DATE: (MM/DD/YYYY)
3/06/2018

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 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).

PRODUCER Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME	Frazier Insurance Agency, Inc.	
	PHONE (A/C, No, Ext):	(804) 754-7610	FAX (A/C, No) (804) 754-7613
	E-MAIL ADDRESS	ifrazier@frazierinsurance.com	
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A	Aegis Security Insurance Company	33898
INSURED Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES CERTIFICATE NUMBER: 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.

IS/IR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0002	03/05/2018	01/01/2019 12:01 AM	GENERAL AGGREGATE	\$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE	\$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						DAMAGE TO RENTED PREMISES	\$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						MED EXP (Any one person)	\$ 5,000.00
								\$
								\$
								\$
								\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> HIRED AUTO <input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$
								\$
								\$
								\$
								\$
								\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$							\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
A	Excess Accident Medical			FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM

25 teams: (45+) TBA, Buds, Colt 45s, Dodgers, Owls, Pirates, Patriots, Swamp Donkeys; (53+) Cardinals, Dodgers, Sharks, Grays, Knights, Huskies, Pirates, Black Sox, Patriots; (60+) Cardinals, Lions, Grays, Jets, Patriots, Pirates, Gameface, Black Sox

CERTIFICATE HOLDER	CANCELLATION
Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	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 John W. Frazier



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PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME: Frazier Insurance Agency, Inc. PHONE (A/C, No, Ext): (804) 754-7610 E-MAIL ADDRESS: ifrazier@frazierinsurance.com FAX (A/C, No): (804) 754-7613
	INSURER(S) AFFORDING COVERAGE INSURER A: Aegis Security Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	NAIC # 33898

COVERAGES

CERTIFICATE NUMBER:

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	<input type="checkbox"/>	CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$ 1,000,000.00
	<input type="checkbox"/>								EACH OCCURRENCE	\$ 1,000,000.00
	<input checked="" type="checkbox"/>	INCLUDES ATHLETIC PARTICIPANTS							DAMAGE TO RENTED PREMISES	\$ 300,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:								MED EXP (Any one person)	\$ 5,000.00
	<input checked="" type="checkbox"/> POLICY	<input type="checkbox"/> PRO- JECT	<input type="checkbox"/> LOC							\$
	AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	BODILY INJURY (Per person)						\$	
	<input type="checkbox"/> ALL OWNED AUTOS		BODILY INJURY (Per accident)						\$	
	<input type="checkbox"/> HIRED AUTO		PROPERTY DAMAGE (Per accident)						\$	
	<input type="checkbox"/>								\$	
		<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR							
<input type="checkbox"/> EXCESS LIAB		<input type="checkbox"/> CLAIMS-MADE	AGGREGATE	\$						
<input type="checkbox"/> DED		<input type="checkbox"/> RETENTION \$		\$						
									<input type="checkbox"/>	\$
										\$
										\$
										\$
A	Excess Accident Medical					FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT AD&D DEDUCTIBLE	\$ 10,000.00 \$ 10,000.00 \$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

25 teams: (45+) TBA, Buds, Colt 45s, Dodgers, Owls, Pirates, Patriots, Swamp Donkeys; (53+) Cardinals, Dodgers, Sharks, Grays, Knights, Huskies, Pirates, Black Sox, Patriots; (60+) Cardinals, Lions, Grays, Jets, Patriots, Pirates, Gameface, Black Sox
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CERTIFICATE HOLDER

CANCELLATION

City of Belleville
101 South Illinois St.
Belleville, IL 62220

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

John W. Frazier



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		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Aegis Security Insurance Company	
		NAIC # 33898	
INSURED Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303		INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

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	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE	\$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						DAMAGE TO RENTED PREMISES	\$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						MED EXP (Any one person)	\$ 5,000.00
								\$
							COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
			PROPERTY DAMAGE (Per accident)	\$				
				\$				
			UMBRELLA LIAB			EACH OCCURRENCE	\$	
			EXCESS LIAB			AGGREGATE	\$	
			DED				\$	
			RETENTION \$				\$	
							\$	
							\$	
							\$	
							\$	
A	Excess Accident Medical			FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT	\$ 10,000.00
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CERTIFICATE HOLDER City of O'Fallon Parks and Recreation 100 North Main Street O'Fallon, MO 63366	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. AUTHORIZED REPRESENTATIVE John W. Frazier
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	INSURER A: Aegis Security Insurance Company NAIC #: 33898
INSURED Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	INSURER B:
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	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY \$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER						DAMAGE TO RENTED PREMISES \$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						MED EXP (Any one person) \$ 5,000.00
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTO <input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	DED <input type="checkbox"/> RETENTION \$						\$
							\$
							\$
							\$
							\$
							\$
A	Excess Accident Medical			FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
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CERTIFICATE HOLDER	CANCELLATION
City of Hazelwood, MO 4622 Aubuchon Rd. Hazelwood, MO 63042	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 John W. Frazier



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								\$
	UMBRELLA LIAB						EACH OCCURRENCE	\$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$
	<input type="checkbox"/> DED	<input type="checkbox"/> RETENTION \$						\$
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City of Fairview Heights 10025 Bunkum Rd. Fairview Heights, IL 62208	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
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	INSURER(S) AFFORDING COVERAGE			NAIC #
	INSURER A			Aegis Security Insurance Company
INSURED Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	INSURER B:			
	INSURER C:			
	INSURER D:			
	INSURER E:			
	INSURER F:			

COVERAGES CERTIFICATE NUMBER: 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.

IS/IR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0002	03/05/2018	01/01/2019 12:01 AM	GENERAL AGGREGATE \$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY \$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						DAMAGE TO RENTED PREMISES \$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						MED EXP (Any one person) \$ 5,000.00
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	DED	RETENTION \$					\$
							\$
							\$
							\$
							\$
A	Excess Accident Medical			FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

25 teams: (45+) TBA, Buds, Colt 45s, Dodgers, Owls, Pirates, Patriots, Swamp Donkeys; (53+) Cardinals, Dodgers, Sharks, Grays, Knights, Huskies, Pirates, Black Sox, Patriots; (60+) Cardinals, Lions, Grays, Jets, Patriots, Pirates, Gameface, Black Sox
Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATE HOLDER	CANCELLATION
City of St. Peters One St. Peters Center Blvd. St. Peters, MO 63376	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 John W. Frazier



CERTIFICATE OF LIABILITY INSURANCE

DATE: (MM/DD/YYYY)
3/06/2018

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 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).

PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME:	Frazier Insurance Agency, Inc.		
		PHONE (A/C, No, Ext):	(804) 754-7610	FAX (A/C, No):	(804) 754-7613
		E-MAIL ADDRESS:	ifrazier@frazierinsurance.com		
		INSURER(S) AFFORDING COVERAGE	NAIC #		
		INSURER A:	Aegis Security Insurance Company		33898
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	INSURER B:			
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			

COVERAGES CERTIFICATE NUMBER: 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.

IS/IR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0002	03/05/2018	01/01/2019 12:01 AM	GENERAL AGGREGATE \$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY \$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						DAMAGE TO RENTED PREMISES \$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC.						MED EXP (Any one person) \$ 5,000.00
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	DED	RETENTION \$					\$
							\$
							\$
							\$
A	Excess Accident Medical			FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

25 teams: (45+) TBA, Buds, Colt 45s, Dodgers, Owls, Pirates, Patriots, Swamp Donkeys; (53+) Cardinals, Dodgers, Sharks, Grays, Knights, Huskies, Pirates, Black Sox, Patriots; (60+) Cardinals, Lions, Grays, Jets, Patriots, Pirates, Gameface, Black Sox
Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATE HOLDER	CANCELLATION
City of Florissant 1 James J. Eagan Dr. Florissant, MO 63033	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 John W. Frazier



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/06/2018

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PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME:	Frazier Insurance Agency, Inc.		
		PHONE (A/C, No. Ext):	(804) 754-7610	FAX (A/C, No):	(804) 754-7613
		E-MAIL ADDRESS:	ifrazier@frazierinsurance.com		
		INSURER(S) AFFORDING COVERAGE	NAIC #		
		INSURER A:	Aegis Security Insurance Company		33898
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	INSURER B:			
		INSURER C:			
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COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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ISR	TYPE OF INSURANCE			ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY					Policy # FGLSP-100-18 Cert #FFL-S-0002	03/05/2018	01/01/2019 12:01 AM	GENERAL AGGREGATE	\$ 2,000,000.00
	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY							PRODUCTS - COMP/OP AGG	\$ 2,000,000.00
	<input type="checkbox"/>	CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$ 1,000,000.00
	<input checked="" type="checkbox"/>	INCLUDES ATHLETIC PARTICIPANTS							EACH OCCURRENCE	\$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:								DAMAGE TO RENTED PREMISES	\$ 300,000.00
	<input checked="" type="checkbox"/> POLICY	<input type="checkbox"/> PRO-JECT	<input type="checkbox"/> LOC						MED EXP (Any one person)	\$ 5,000.00
										\$
AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Ea accident)	\$	
<input type="checkbox"/>	ANY AUTO							BODILY INJURY (Per person)	\$	
<input type="checkbox"/>	ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
<input type="checkbox"/>	HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
<input type="checkbox"/>									\$	
	UMBRELLA LIAB	<input type="checkbox"/>	OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB	<input type="checkbox"/>	CLAIMS-MADE						AGGREGATE	\$
	DED	<input type="checkbox"/>	RETENTION \$							\$
										\$
										\$
										\$
										\$
										\$
A	Excess Accident Medical					FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT	\$ 10,000.00
									AD&D	\$ 10,000.00
									DEDUCTIBLE	\$ 100.00

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POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM.

25 teams: (45+) TBA, Buds, Colt 45s, Dodgers, Owls, Pirates, Patriots, Swamp Donkeys; (53+) Cardinals, Dodgers, Sharks, Grays, Knights, Huskies, Pirates, Black Sox, Patriots; (60+) Cardinals, Lions, Grays, Jets, Patriots, Pirates, Gameface, Black Sox
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CERTIFICATE HOLDER	CANCELLATION
Hancock Place School District 9417 S. Broadway St. Louis, MO 63125	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 John W. Frazier



CERTIFICATE OF LIABILITY INSURANCE

DATE: (MM/DD/YYYY)
3/06/2018

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PRODUCER	Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250	CONTACT NAME:	Frazier Insurance Agency, Inc.	
		PHONE (A/C, No. Ext):	(804) 754-7610	FAX (A/C, No.):
		E-MAIL ADDRESS:	ifrazier@frazierinsurance.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #	
		INSURER A:	Aegis Security Insurance Company	33898
INSURED	Sports and Special Event Risk Purchasing Group, Inc. Roy Hobbs Diamond Enterprises LLC DBA Roy Hobbs Baseball/St. Louis Baseball Forever League 2658 Horseshoe Ridge St. Charles, MO 63303	INSURER B:		
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A	GENERAL LIABILITY			Policy # FGLSP-100-18 Cert #FFL-S-0002	03/05/2018	01/01/2019 12:01 AM	GENERAL AGGREGATE \$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY \$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS						EACH OCCURRENCE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:						DAMAGE TO RENTED PREMISES \$ 300,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						MED EXP (Any one person) \$ 5,000.00
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTO	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	DED	RETENTION \$					\$
							\$
							\$
							\$
							\$
A	Excess Accident Medical			FR0134	03/05/2018	01/01/2019 12:01 AM	LIMIT \$ 10,000.00 AD&D \$ 10,000.00 DEDUCTIBLE \$ 100.00

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Certificate Holder is An Additional Insured, But Only As Respects The Operations Of The Named Insured.

CERTIFICATE HOLDER	CANCELLATION
Harris Stowe State University 3026 Laclede Avenue St. Louis, MO 63103	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 John W. Frazier