

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/05/2018

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 have ADDITIONAL INSURED provisions or be endorsed.

	SUBROGATION IS WAIVED, subject nis certificate does not confer rights to							equire an endorsement	. A st	atement on	
PRODUCER						CONTACT NAME:					
Marsh USA Inc. 1717 Arch Street						PHONE   FAX (A/C, No, Ext): (A/C, No):					
Philadelphia, PA 19103-2797						(A/C, NO, EXT): (A/C, NO). E-MAIL ADDRESS:					
Attn: PHILADELPHIA.CERTS@MARSH.COM						INSURER(S) AFFORDING COVERAGE NAIC #					
CN103174956-GWU-Stand-18-19						INSURER A : Pinnacle Consortium of Higher Ed VT RRRG				11980	
INSURED						INSURER B : N/A					
THE GEORGE WASHINGTON UNIVERSITY 2033 K STREET NW										38962	
SUITE 220					INSURER D: N/A					N/A	
WASHINGTON, DC 20052					INSURER E :						
					INSURER F:						
COVERAGES CERTIFICATE NUMBER:					CLE	-006202017-04		REVISION NUMBER: 6			
IN C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY INCLUSIONS AND CONDITIONS OF SUCHI	QUIR PERT POLIC	REMEI AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT	OR OTHER I S DESCRIBEI PAID CLAIMS.	OCUMENT WITH RESPEC	OT TO	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL INSD	DDL SUBR NSD WVD POLICY NUMBER		POLICY EFF (MM/DD/YYYY) (N		POLICY EXP (MM/DD/YYYY)	LIMITS			
Α	X COMMERCIAL GENERAL LIABILITY			PCHE2018-05		07/01/2018	07/01/2019	EACH OCCURRENCE	\$	2,000,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	2,000,000	
								MED EXP (Any one person)	\$	2,500	
								PERSONAL & ADV INJURY	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	5,000,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000	
	OTHER:							COMPINED CINICI E LIMIT	\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per person)	\$		
	AUTOS ONLY AUTOS HIRED NON-OWNED							BODILY INJURY (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
С				YUB 301086K			07/01/2010		\$	2 000 000	
	X UMBRELLA LIAB X OCCUR			1 OB 20 1000K		07/01/2018	07/01/2019	EACH OCCURRENCE	\$	2,000,000	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	2,000,000	
	DED   RETENTION \$   WORKERS COMPENSATION							PER OTH-	\$		
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE								•		
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT  E.L. DISEASE - EA EMPLOYEE	\$		
	If yes, describe under							E.L. DISEASE - POLICY LIMIT	\$ \$		
Α	PROFESSIONAL LIABILITY			PCHE2018-05		07/01/2018	07/01/2019	EACH CLAIM	φ	2,000,000	
, ,	The Essient Elmstern			1 01122010 00		07/01/2010	07/01/2017	AGGREGATE		3.000.000	
								AGGREGATE		3,000,000	
DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											
CERTIFICATE HOLDER						CANCELLATION					
The George Washington University 2033 K Street NW, Suite 22 Washington, DC 20052						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 of Marsh USA Inc.					
						Manashi Mukherjee Manashi Mukherjee					