ACORD	

## EVIDENCE OF PROPERTY INSURANCE U00056510

DATE (MM/DD/YYYY)

						01/16/2024	
THIS EVIDENCE OF PROPER ADDITIONAL INTEREST NAM	IED BELOW. THIS EVIDEN	CE DOES NOT	AFFIRMATIVELY	OR NEGATIVELY	Y AMEND, EXT	END OR ALTER THE	
COVERAGE AFFORDED BY 1	THE POLICIES BELOW. TH	IS EVIDENCE (	OF INSURANCE DO	DES NOT CONST	ITUTE A CONT	RACT BETWEEN THE	
ISSUING INSURER(S), AUTHO	BUONE			NAL INTEREST.			
AGENCY	(A/C, No, Ext): 1-800-426-288	9	COMPANY	•		00070	
	&K Insurance Group, Inc.			Markel Insurance Company 38970			
1712 Magnavox Way Fort Wayne, IN 46804							
Fort Wayne, in 40004							
FAX 1-260-459-5105 E-MAIL ADDRES	ss. info@sportsinsurance-kk	.com					
CODE:	SUB CODE:						
AGENCY	SOB CODE.					_	
CUSTOMER ID:			LOAN NUMBER		POLICY NUMBER		
INSURED				-	TBD		
Plano Youth Organization			EFFECTIVE DATE	EXPIRATION DATE		UNTIL TERMINATED IF	
DBA: PYO			01/16/2024	01/16/2025	CHECKED	UNTIL TERMINATED IF	
310 Hubbard Cir			08:56 PM EDT	12:01 AM EDT			
Plano, IL 60545			THIS REPLACES PRIOR EVIDENCE DATED:				
PROPERTY INFORMATION							
LOCATION/DESCRIPTION							
THE POLICIES OF INSURANC NOTWITHSTANDING ANY REC							
EVIDENCE OF PROPERTY INS	URANCE MAY BE ISSUED C	R MAY PERTAI	N. THE INSURANCE	AFFORDED BY T	HE POLICIES D	ESCRIBED HEREIN IS	
SUBJECT TO ALL THE TERMS,	, EXCLUSIONS AND CONDIT	IONS OF SUCH	POLICIES. LIMITS	SHOWN MAY HAV	'E BEEN REDUC	ED BY PAID CLAIMS.	
COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD S	PECIAL			
COVERAGE INFORMATION	FERILS INSORED	BASIC					
	COVERAGE / PERILS / FORM	IS		AMOUNT OF IN	SURANCE	DEDUCTIBLE	
Inland Marine – Miscellaneous	Property: Business Persona	I Property includ	ling: Sports equipm	ent, \$10,0	00	\$250*	
field maintenance equipment, con	ncession stand equipment (ex	cluding products	), small portable stor	age			
units and miscellaneous equipme	ent and supplies			-			
DEMARKS (including Special (	Conditions						
REMARKS (including Special (	conditions)						
*Deductible applies per claim.							
CANCELLATION							
SHOULD ANY OF THE ABOVE	DESCRIBED POLICIES BE						
ACCORDANCE WITH THE POL							
ADDITIONAL INTEREST							
NAME AND ADDRESS			ADDITIONAL IN	SURED LENDER'	'S LOSS PAYABLE	LOSS PAYEE	
Evidence of Coverage			MORTGAGEE				
			LOAN #	1 1			
			AUTHORIZED REPRESENTATIVE				
Scott Junhal							
				Scott	purhal		
			4	•			

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