## **CERTIFICATE OF INSURANCE**

Insurance Company of Springfield, Inc. c/o USA Risk Group Cayman Islands P.O. Box 1085
Queensgate House, 5th Floor
Grand Cayman, KY1-1102, Cayman Islands

## **NAMED INSURED:**

Cox College 1423 N. Jefferson Avenue Springfield, MO 65802 This certificate is not an insurance policy or binder for an insurance policy. This certificate is issued as a matter of information only and confers no rights upon the certificate holder.

This form does not amend, extend, or alter the coverage afforded by the policies listed below.

**Coverage:** This is to certify that the policy of insurance listed below has been issued to the insured named above for the policy period indicated and is in full force and effect as of this date. 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 police described herein is subject to all the terms, conditions and exclusions of such policy. Aggregate limits shown may have been reduced by paid claims.

Carrier	Type of Coverage	Policy Number	Policy Period	Limits of Liability
Description:				
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Should any of the above described be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail \_\_\_ days written notice to the Certificate Holder named below, but failure to do so shall impose no obligation or liability of any kind upon the insurer or its representatives.

Issue Date:	Authorized Representative:
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Certificate Holder:	For questions, please contact:
	Bill Castans
	Willis of Greater Kansas, Inc.
	Phone: 913-339-0800
	Fax: 913-339-9660