## MEMORANDUM OF CLUB LIABILITY INSURANCE

Coverage is provided in the: HANOVER INSURANCE COMPANY								
POLICY NUMBER	POLICY PERIOD			AGENCY CODE				
	FROM	TO						
RSC19738	8/14/2022	8/14/2023	AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN BELOW.					
NAMED INSURED AND MAILING ADDRESS			AGENT					
Red River Valley Amateur Radio Club 2448 Lamar Avenue #726 Paris TX, 75460			RISK STRATEGIES COMPANY 333 W. WACKER DRIVE SUITE 1200 CHICAGO, IL 60606					

## Form of Business:

AMERICAN RADIO RELAY LEAGUE- RADIO CLUB LIABILITY

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY. THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PART(S) FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

		PREMIUM
Commercial Property Coverage	Part	\$ 
Commercial General Liability Commercial	overage Part	\$ 200.00
Commercial Crime Coverage Pa	art	\$ 
Commercial Inland Marine Cove	erage Part	\$ 
Boiler and Machinery coverage	part	\$ 
Commercial Auto Coverage Par	t	\$ 

## **PREMIUM**

The total premium of \$ 200.00 is due at inception

Form(s) and Endorsement(s) applicable to all Coverage Part(s) and made a part of this policy at time of issue: 401-1127 01/08, 401-1135 01/08, IL 0003 09/08, IL0017 11/98, IL0022 05/87, IL0140 11/05, IL0260 09/07, SIG1100 08/14

LIMITS OF INSURANCE	
General Aggregate Limit (Other Than Products Completed Operations)	\$ 2,000,000
Products Completed Operations Aggregate Limit	\$ 2,000,000
Personal and Advertising Injury Limit	\$ 1,000,000
Each Occurrence Limit	\$ 1,000,000
Fire Damage Limit (Any One Fire)	\$ 100,000
Medical Expense Limit (Any One Person)	\$ 10,000

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART COVERAGE

FORM(S) AND

FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.