



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08-26-2024

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. 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 Berkshire Hathaway Direct Insurance Company 1314 Douglas Street, Suite 1400 Omaha, NE 68102	CONTACT NAME:	
	PHONE 1-800-507-4495 (A/C, No, Ext):	FAX: 866-715-2764 (A/C, No):
	E-MAIL ADDRESS: service@threeinsurance.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A : Berkshire Hathaway Direct Insurance Company	
	NAIC # 10391	
INSURED T Clark Enterprise, Inc. 3330 Woodcrest Dr Ste D Baton Rouge, LA 70814-2503	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.

INSR LTR	TYPE OF INSURANCE		ADDL INSD	SUB R WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CP140187020P2022	08/18/2024	08/18/2025	EACH OCCURRENCE	\$ 2,000,000
			DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000					
			MED EXP (Any one person)	\$ 5,000					
			PERSONAL & ADV INJURY	\$ 2,000,000					
								GENERAL AGGREGATE	\$ 5,000,000
								PRODUCTS - COMP/OP AGG	\$ SEE GENERAL AGGREGATE
									\$
A	X	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY			CP140187020P2022	08/18/2024	08/18/2025	COMBINED SINGLE LIMIT (Ea accident)	\$
			BODILY INJURY (Per person)	\$					
			BODILY INJURY (Per accident)	\$					
			PROPERTY DAMAGE (Per accident)	\$					
								HIRED AND NON-OWNED	\$2,000,000/5,000,000
								EACH OCCURRENCE	\$
								AGGREGATE	\$
									\$
A	X	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y / N OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		CP140187020P2022	08/18/2024	08/18/2025	PER STATUTE	X OTHER
								E.L. EACH ACCIDENT	\$ 2,000,000
								E.L. DISEASE - EA EMPLOYEE	\$ 2,000,000
								E.L. DISEASE - POLICY LIMIT	\$ 5,000,000
A	X	ERRORS & OMISSIONS CYBER			CP140187020P2022	08/18/2024	08/18/2025	PerOccur/Aggregate	\$2,000,000 / 5,000,000
								PerOccur/Aggregate	\$2,000,000 / 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDERT Clark Enterprise, Inc.
3330 Woodcrest Dr, Ste D
Baton Rouge, LA 70814**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

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ACORD 25 (2016/03)

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