STATE OF GEORGIA DEPARTMENT OF ADMINISTRATIVE SERVICES CERTIFICATE OF INSURANCE

Name and Address of Agency	Coverages Afforded By:			
Department of Administrative Services Risk Management Services	Company Letter	А	State of Ga. Risk Management Services	
200 Piedmont Avenue SE Suite 1220 West Tower Atlanta, Georgia 30334-9010	Company Letter	В	Nationwide Casualty Company	
Name and Address of Insured BOR-University Of West Georgia 1601 Maple Street, Room 309 UCC Carrollton,GA 30118	Company Letter	С		
	Company Letter	D		
	Company Letter	Е		

This certificate is given as a matter of information only and confers no rights upon the certificate holder. 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 policy(ies) described herein is subject to all the terms, exclusions and conditions of such policy(ies). This certificate does not amend, extend or otherwise alter the coverages afforded by the policy(ies) described herein is subject to described herein.

COMPANY LETTER	TYPES OF INSURANCE	POLICY NUMBER	POLICY EXPIRES	LIMITS APPLY SEPARATELY PER POLIC
A	COV. LIABILITY (GL, MEDICAL MALPRACTICE) A TORT CLAIMS LIABILITY POLICY. State agency or Authority is insured	TCP 401-14-26	6/30/2026	BODILY INJURY & PROPERTY DAMAGE & PERSONAL INJURY COMBINED
Α	When sued in state courts. B EMPLOYEE LIABILITY POLICY. Employee is insured when sued	CGL 401-14-26	6/30/2026	PER PERSON \$1,000,000
	Individually. C STATE AUTHORITY POLICY. Coverage applies when Authority. is sued in federal court			AGGREGATE \$3,000,000
A	Contractual and/or Additional Insured Coverage appli	ies to Certificate Holder		OCCURRENCE POLICIES (X)
	if policy A B C is checked			
	D Owned, rented, and non-owned			C.S.L
	automobiles when Agency or Authority	TCP 401-14-26	6/30/2026	
	is sued in state court or employee	TGF 401-14-20	0/30/2020	PER PERSON \$1,000,000
	is sued in federal court			AGGREGATE \$3,000,000
	E Physical Damage Coverage			Other than Coll. 500 Ded. Coll. 500 Ded.
	F Excess Authority Coverage when			
	Authority is sued in federal court			LIMITS SHOWN INCLUDE THE LIMITS OF
	G Excess Contractual and /or additional insured coverage when certificate			LIABILITY SHOWN UNDER COVERAGES C-D FOR AUTHORITIES ONLY
	holder is sued in federal or state court			SINGLE LIMIT LIABILITY:
	yes no			
Α	H WORKER'S COMP. COVERAGE	SELF-INSURED	NONE	STATUTE
	COV. MISC. COVERAGE			
в	I Property	FCO2308758	6/30/2026	\$50,000,000
	J Other Fidelity Bond			
ntractual L	N OF OPERATIONS/LOCATIONS/VEHICLES .iability is NOT provided and the Certificate Hold tate assigned duties.	er is NOT an addition	al insured. Cover	age applies to state employees while
morning st	are assigned duties.			

days written notice to the certificate holder, however Risk Management Services assumes no legal responsibility for failure to do so.

NAME AND ADDRESS OF CERTIFICATE HOLDER	DATE ISSUED:06/06/2025	
TO WHOM IT MAY CONCERN	Wach E.I	VE