| MEMORANDUM OF INSURANCE  |  |  |   | Date Issued<br>August 8, 2023  |                                     |                                      |
|--|--|--|---|--|-------------------------------------|--------------------------------------|
| Producer Association Member Benefits Advisors, LLC. In CA dba Assn. Member Benefits & Insurance Agency P.O. Box 14576 Des Moines, IA 50306-3576 www.proliability.com                   |  |  |   | This memorandum is issued as a matter of information only and confers no rights upon the holder. This memorandum does not amend, extend or alter the coverages afforded by the Certificate listed below. |                                     |                                      |
| <b>T</b> 1   |  |  |   | Company Affording Coverage Liberty Insurance Underwriters Inc.   |                                     |                                      |
| Insured The Students of University of North Carolina System c/o NCAIA 101 Weston Oaks Court Cary, NC 27513   |  |  |   | Liberty Hisu   | Tance Chactwin                      | ters me.                             |
| This is to certify that the Certificate withstanding any requirement, term or may pertain, the insurance affore Certificate. The limits shown may be evidence of coverage. No coverage | n or condition of any cont<br>ded by the Certificate desc<br>have been reduced by paid | ract or other docume<br>c <mark>ribed herein is subj<br/>d claims.</mark> The Memo | ent with<br><b>ect to a</b><br>orandun  | n respect to whi<br>Il the terms, ex<br>n of Insurance   | ich this memorane clusions and cond | dum may be issued<br>litions of such |
| Type of Insurance  | Certificate Number   | <b>Effective Date</b>  | Exp   | iration Date   | Limits                              |                                      |
| Professional Liability   | AHV-103612006  | 08/15/2023   | 08/15/2024  |  | Per Occurrence Aggregate            | \$2,000,000<br>\$4,000,000           |
| General Liability  |  |  |   |  | Per Occurrence Aggregate            |                                      |
| Evidence of Insurance Memo negligence of the named insure  |  |  |   |  | to claims arising                   | out of the sole                      |
| Memorandum Holder:  University of North Carolina at Greensboro 1111 Spring Garden Street #2607 Greensboro, NC 27402  |  |  | Should the above described Certificate be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. |  |                                     |                                      |
|  |  |  | Authorized Representative  The fille  Brad J. Feller  Principal   CA License #0M07073   |  |                                     |                                      |