

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/27/2023

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).

	<u> </u>		(-)-		
PRODUCER	2 31 41 41	CONTACT NAME:	Landrum Human Resou	rce Companies, Inc.	
Liberty Mutual Insurance C 500 N 3rd St, Suite 300	o. National Insurance East	PHONE (A/C, No, Ext):	850-476-5100	FAX (A/C, No):	
Wausau, WI 54403		E-MAIL ADDRESS:	COI@Landrumhr.com		
,			INSURER(S) AFFORDING COVER	RAGE	NAIC#
www.LibertyMutual.com		INSURER A: Liberty Mutual Fire Insurance Company			23035
INSURED		INSURER B:			
Landrum Human Resource	e Companies, Inc. al Employer Services, Inc.	INSURER C:			
Pensacola FL 32502		INSURER D:			
		INSURER E :			
		INSURER F:			
COVERAGES	<b>CERTIFICATE NUMBER:</b> 77922318		REVISION	NUMBER:	

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	R		SUBR		POLICY EFF		LIMITS				
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$			
	CLAIMS-MADE OCCUR				^	1	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$			
							MED EXP (Any one person)	\$			
l							PERSONAL & ADV INJURY	\$			
İ	GEN'L AGGREGATE LIMIT APPLIES PER:					i	GENERAL AGGREGATE	\$			
İ	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$			
	OTHER:						COMBINED SINGLE LIMIT	\$			
	AUTOMOBILE LIABILITY  ANY AUTO OWNED AUTOS ONLY SCHEDULED AUTOS						(Ea accident)	\$			
							BODILY INJURY (Per person)	\$			
							BODILY INJURY (Per accident)	\$			
	HIRED NON-OWNED AUTOS ONLY					i	PROPERTY DAMAGE (Per accident)	\$			
<u></u>								\$			
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$			
İ	EXCESS LIAB CLAIMS-MADE	1				i	AGGREGATE	\$			
	DED RETENTION\$							\$			
A WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			1	WA2-65D-428303-064	1/1/2024	1/1/2025	✓ PER OTH- STATUTE ER				
		N/A					E.L. EACH ACCIDENT	\$1,000,000			
							E.L. DISEASE - EA EMPLOYEE	\$1,000,000			
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$1,000,000			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attained by the control of th

Workers Compensation coverage for Employees leased to but not subcontractors of: Landrum Professional Employer Services, Inc. 219 E. Garden St. Ste 500 Pensacola FL 325 Contract # C22-3165-HR Waiver of subrogation is included in favor of the certificate holder, where required by written

CONTRACT: C22-3165-HR
LandurmHR Workforce Solutions, Inc.
Temporary Staffing Services
EXPIRES:04/04/2025 W/2 1 YR RENEWALS

**CERTIFICATE HOLDER** 

CANCELLATION

Okaloosa County Board of County Commissioners 302 N. Wilson St. Crestview FL 32536 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

Chelsea Miller

Chilsea Miller

© 1988-2015 ACORD CORPORATION. All rights reserved.