



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/27/2025

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.

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.

Table with 2 main columns: PRODUCER (The Hess Agency) and CONTACT INFORMATION (E-mail: hess@hessagency.com). Includes sub-sections for INSURED (Mt Gretna Campmeeting Assn) and INSURER(S) AFFORDING COVERAGE (Erie Insurance Company, Erie Insurance Exchange).

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.

Main table with columns: INSR LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Workers Compensation, and Directors & Officers.

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

Table with 2 columns: CERTIFICATE HOLDER (File Copy Only) and 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. Includes signature of Rebecca S. Keiter).



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
3/27/2025

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

| | | | | |
|---|--|--|---|--|
| AGENCY The Hess Agency 2990 Mount Joy Rd Manheim, PA 17545 | | PHONE (A/C, No, Ext): (717) 665-2770 | COMPANY Erie Insurance Company PO Box 1699 Erie, PA 16530 | |
| FAX (A/C, No): (717) 665-4493 | | E-MAIL ADDRESS: hess@hessagency.com | | |
| CODE: AA7489 | | SUB CODE: 3588 | | |
| AGENCY CUSTOMER ID #: MTGRETN-03 | | | | |
| INSURED Mt Gretna Campmeeting Assn & Mt Gretna Tabernacle Assn PO Box 428 Mount Gretna, PA 17064-0428 | | LOAN NUMBER | | POLICY NUMBER Q61-0270469 |
| | | EFFECTIVE DATE 4/1/2025 | EXPIRATION DATE 4/1/2026 | <input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED |
| THIS REPLACES PRIOR EVIDENCE DATED: | | | | |

PROPERTY INFORMATION

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| LOCATION/DESCRIPTION Mt Gretna Campmeeting Association |
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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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION

| PERILS INSURED | BASIC | BROAD | <input checked="" type="checkbox"/> SPECIAL | AMOUNT OF INSURANCE | DEDUCTIBLE |
|---|-------|-------|---|---------------------|------------|
| COVERAGE / PERILS / FORMS | | | | | |
| Blanket - Buildings & Business Personal Property | | | | \$3,580,800 | 1,000 |
| Blanket - Buildings & Business Personal Property - 2% ded | | | | \$3,580,800 | |

REMARKS (Including Special Conditions)

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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.

ADDITIONAL INTEREST

| | | | | | | |
|--|--------------------------|--------------------|--------------------------|-----------------------|--------------------------|------------|
| NAME AND ADDRESS FILE COPY | <input type="checkbox"/> | ADDITIONAL INSURED | <input type="checkbox"/> | LENDER'S LOSS PAYABLE | <input type="checkbox"/> | LOSS PAYEE |
| | <input type="checkbox"/> | MORTGAGEE | | | | |
| | LOAN # | | | | | |
| AUTHORIZED REPRESENTATIVE <i>Rebecca S. Kieck</i> | | | | | | |