

SBARNETT



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/12/2024

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).

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PRODUCER McDonald-Zaring Insurance, a Marsh & McLennan Agency LLC company Marsh McLennan Agency LLC 22 E. Main Walla Walla, WA 99362					CONTACT NAME: PHONE (A/C, No, Ext): (509) 525-5730 E-MAIL E-MAIL E-MAIL FAX (A/C, No):					
					E-MAIL ADDRESS: mmanwmziinfo@marshmma.com					
					INSURER(S) AFFORDING COVERAGE			NAIC#		
					INSURER A: Western National Mutual Insurance Company 15377					
INSURED					INSURER B:					
Walla Walla Valley Wine Alliance 5 W Alder St Ste 241 Walla Walla, WA 99362				INSURER C:						
				INSURER D:						
Trana Trana, TV Coool					INSURER E :					
					INSURER F:					
COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICII INDICATED. NOTWITHSTANDING ANY FORTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	REQUI PER	REMI TAIN,	ENT, TERM OR CONDITIO THE INSURANCE AFFOR	N OF A	NY CONTRA 7 THE POLIC	CT OR OTHER IES DESCRIB	R DOCUMENT WITH RESP ED HEREIN IS SUBJECT	ECT TO	WHICH THIS	
INSR LTR TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	TS		
A X COMMERCIAL GENERAL LIABILITY					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	EACH OCCURRENCE	\$	1,000,000	
CLAIMS-MADE X OCCUR	x		CPP 1320799 00		8/27/2023	8/27/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000	
χ Liquor Liability	^						MED EXP (Any one person)	\$	5,000	
							PERSONAL & ADV INJURY	\$	1,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
POLICY PRO- LOC							PRODUCTS - COMP/OP AGG		2,000,000	
OTHER:								\$		
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
ANY AUTO							BODILY INJURY (Per person)	\$		
OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident) \$		
HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
7,0700 0,121								\$		
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
DED RETENTION \$								\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER			
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYE	E \$		
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORE	0 101, Additional Remarks Schedu	ıle, may b	e attached if mor	e space is requir	red)			
Event: (insert specific event, date and address	ess)									
i.e. Event: Celebrate Walla Walla Valley Win	e Vin	tage	Pour to be held July 11, 20)24 @ V	Valla Walla Vi	ntners, 225 V	/ineyard Ln, Walla Walla,	WA 99	362	
CERTIFICATE HOLDER					CANCELLATION					
Winery Name					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					