<b>CERTIFICATE OF INSURANCE</b>						Issue Date 01-Apr-24	
BROKER Aon Reed Stenhouse Inc.   2103 11TH AVENUE, SUITE 800 REGINA, SK S4P 3Z8   PHONE: (306) 569-6700 FAX: (306) 359-0387			RIGHTS U	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
			COMPANY A	CERTAIN LLOYD'S UNDERWRITERS THROUGH MARKEL AGREEMENT NO. MKL2018001			
	INSURED'S FULL NAME AND MAILING ADDRESS						
Saskatchewan Baseball Association Inc. 300-1734 Elphinstone Street Regina, SK S4T 1K1				COMPANY C			
				COMPANY D			
541 IKI			COMPANY E				
Certificate							
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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
CO	TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE	EXPIRATION	1		
LTR			DATE	DATE	•	I DOLLARS UNLESS INDICATED OTHERWISE)	
Α	COMMERCIAL GENERAL LIABILITY	CAS734071-02	Apr. 1, 2024	Apr. 1, 2025	\$10,000,000	EACH OCCURRENCE, BODILY INJURY AND PROPERTY DAMAGE	
					\$1,000,000	TENANT'S LEGAL LIABILITY	
						SUBJECT TO AGGREGATE WHERE APPLICABLE	
RE: EVIDENCE OF INSURANCE WITH RESPECT TO 2024 SEASON							
CERTIFICATE HOLDER					AUTHORIZED REPRESENTATIVE		
WHITE BUTTE MINOR BALL Box 721 WHITE CITY , SK S4L 5B1					Aon Reed Stenhouse Inc.		