

PBA AG 07-24-2024

Approved

**Delta Sigma Theta Sorority, Inc**  
**Oklahoma City Alumnae Chapter**  
 PO Box 54396  
 Oklahoma City, OK 73154



July 16, 2024

**Buiding 4205 N. Lincoln (ACOG) Large Room Use Request**

To: Oklahoma Public Building Authority  
 Attn: Keith Monroe, Facilities Manager for Oklahoma Buildings

First, we want to say thank you very much thus far for allowing use to use the large conference room for our monthly business meeting.

The next year's insurance liability policy rider for your records will be provided in January. Our carrier provides us with General Liability coverage with limits of \$1,000,000 per occurrence and \$2,000,000 annual aggregate for our events and meeting locations.

We would still like to have access starting at 11am on each of the Saturday dates. We would like to be slated for every 3<sup>rd</sup> Saturday of month, except for the months of July and August, with the same access time of 11am perpetually until notified of a change. We understand now, that the months of December and June may not be available to us.

The following dates are requested if we need to provide them for every two years.:

September 21, 2024	October 2024-virtual	November 16, 2024	December 2024-N/A
January 18, 2025	February 15, 2025	March 15, 2025	April 19, 2025
May 17, 2025	June 2025-N/A	September 20, 2025	October 18, 2025
November 15, 2025	December 2025 -N/A	January 17, 2026	February 21, 2026
March 21, 2026	April 18, 2026	May 16, 2026	June 2026 -N/A
September 19, 2026	October 17, 2026	November 21, 2026	December 2026-N/A

We normally hold our meetings every third Saturday. However, if a National or Regional Conference conflicts, then are dates are adjusted, but, we would have several months notice.

I can be reached by phone at (405) 819-7984, by fax at (405) 619-0420 or by email at presidentokcalumnae@gmail.com.

Respectfully submitted,

*Angela W. Rogers*

Angela W. Rogers, Chapter President  
 Oklahoma City Alumnae Chapter  
 Delta Sigma Theta Sorority, Inc.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/29/2023

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).


<b>PRODUCER</b> Holmes Murphy 13810 FNB Parkway, Suite 300 Richard Jungman Omaha NE 68154	<b>CONTACT NAME:</b> Emily Baker
	<b>PHONE (A/C, No. Ext):</b> _____ <b>FAX (A/C, No.):</b> _____ <b>E-MAIL ADDRESS:</b> DSTTeam@holmesmurphy.com
<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURER A:</b> Admiral Insurance Company	<b>NAIC #</b> 24856
<b>INSURED</b> Grand Chapter of Delta Sigma Theta Sorority, Inc. 1707 New Hampshire Ave NW Washington DC 20009	<b>INSURER B:</b>
	<b>INSURER C:</b>
	<b>INSURER D:</b>
	<b>INSURER E:</b>
	<b>INSURER F:</b>

**COVERAGES**      **CB**      **CERTIFICATE NUMBER:** Cert ID 10775 (2)      **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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	CA000018545-11	12/01/2023	12/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 1,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
The Certificate Holder is an additional insured under the above policy. This is in regard to the Monthly Chapter meetings hosted by the Oklahoma City Alumnae Chapter of Delta Sigma Theta Sorority, Inc at the Association of Central Oklahoma Government (ACOG) located at 4205 N. Lincoln Blvd. , Oklahoma City, OK 73105

<b>CERTIFICATE HOLDER</b>  Oklahoma County Public Buildings Authority  320 Robert S Kerr  Oklahoma City OK 73102	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b> 

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