

CERTIFICATE OF COVERAGE	DATE (MM/DD/YY) 09/24/2013
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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 AS SHOWN BELOW. THIS CERTIFICATE DOES NOT CONSTITUTE A CONTRACT BETWEEN PCAT, THE AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER (Contact With Any Questions) Jerry Bravenec / Cindi Ray Carlisle Insurance Agency, Inc. 611 South 14 th Street, Suite 100 Kingsville, TX 78363 Phone: 877-595-5611 FAX: 361-595-5815	CARRIER AFFORDING COVERAGE CARRIER A: Property Casualty Alliance of Texas (PCAT) CARRIER B:
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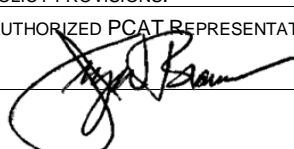
COVERED MEMBER
 Region One Education Service Center
 1900 West Schunior
 Edinburg, TX 78541

COVERAGES

THIS IS TO CERTIFY THAT THE COVERAGES LISTED BELOW HAVE BEEN ISSUED TO THE MEMBER NAMED ABOVE FOR THE COVERAGE 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 COVERAGES DESCRIBED HEREIN ARE SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH COVERAGE DOCUMENTS. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CARRIER LTR	TYPE OF COVERAGE	ADDL INSR	MEMBER NUMBER	EFF DATE (MM/DD/YY)	EXP DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY					
	<input checked="" type="checkbox"/> General Liability	<input type="checkbox"/>	PC108-960	09/01/2013	09/01/2014	Each Occurrence \$ 1,000,000
	<input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occurrence					Fire Damage (Any one fire) \$ 500,000
	<input type="checkbox"/> _____					Med Exp (Any one person) \$ -0-
	<input type="checkbox"/> _____					Personal & Adv Injury \$ 1,000,000
	General Aggregate Limit Applies Per: <input checked="" type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> Loc					General Aggregate \$ 1,000,000 Products – Comp/Op Agg \$ 1,000,000
	AUTOMOBILE LIABILITY					
	<input type="checkbox"/> Any Auto	<input type="checkbox"/>				Combined Single Limit (Each Accident) \$
	<input type="checkbox"/> All Owned Autos					Bodily Injury (Per Person) \$
	<input type="checkbox"/> Scheduled Autos					Bodily Injury (Per Accident) \$
	<input type="checkbox"/> Non-Owned Auto					Property Damage (Per Accident) \$
	OTHER					\$ \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES
 For information purposes only as respects Regional Mock Trial Competition at Hidalgo County Courthouse.

CERTIFICATE HOLDER County of Hidalgo, Hidalgo County Courthouse 100 N. Clossner Edinburg TX 78539	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED COVERAGES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED PCAT REPRESENTATIVE 
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