Policy Number: 607111884 and 618770848

Date Entered: 1/31/2022

DATE (MM/DD/YYYY) 1/3/2025

CERTIFICATE OF LIABILITY INSURANCE

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).

### OF ################################						
PRODUCER	Kara K. Anspach Insurance Agency, Inc.	CONTACT Kara K Anspach				
	10049 E Dynamite Blvd #135	PHONE (A/C, No, Ext): (480) 998-8070 FAX (A/C, No): (480) 9	FAX (A/C, No): (480) 951-3519			
	10045 I Dynamice Diva #155	E-MAIL ADDRESS: kara@karains.com				
	Scottsdale, AZ 85262	INSURER(S) AFFORDING COVERAGE	NAIC#			
		INSURER A: Truck Insurance Exchange				
INSURED	Rancho Reina HOA	INSURER B: Truck Insurance Exchange	·			
		INSURER C:				
	C/O Vision Community Management	INSURER D:				
	16625 S Desert Foothills Pkwy	INSURER E :				
	Phoenix, AZ 85020	INSURER F:				
COVERA	GES 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

NSR LTR	NSR TYPE OF INSURANCE		SUBR		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE OCCUR	$ \times $					DAMAGE TO RENTED PREMISES (Ea occurrence)	_{\$} 75,000
				60711 18 84	01/05/2025	01/05/2026	MED EXP (Any one person)	_{\$} 5,000
							PERSONAL & ADV INJURY	§ Included
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$2,000,000
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$1,000,000
	OTHER:							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO						BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$
	DED RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH- STATUTE ER	
ANV EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A					E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	'
Directors & Officers				60711 18 84	01/05/02025	01/05/2026		\$1,000,000
	Fidelity Bond	$\perp X$		60711 18 84	01/05/2025	01/05/2026		\$75,000

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

25 single family home HOA- COMMON AREAS ONLY

CERTIFICATE HOLDER	CANCELLATION				
Rancho Reina HOA					
C/O Vision Community Management	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
as additional insured					
16625 S Desert Foothills Pkwy	ACCORDANCE WITH THE POLICT PROVISIONS.				
Phoenix AZ 85020	AUTHORIZED REPRESENTATIVE				
	Kara K. Anspach				