

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 6/20/2025

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policyles) must have ADDITIONAL INSURED provisions or be endorsed.           If SUBROACTION IS WAVED, subject to the terms and conditions of the policy certain policies may require an endorsement .A statement on this certificate holder in licu of such endorsement(s).           Produces:         Control (Control (Contre)))	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.										
Producers LaBarrel/Ckensel Insurance 30 Enterprise. Suite 100 Aliso Viejo CA 32505         Construction (Marken 200) (Marken 200)	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										
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Insure model         Insure model         NACE           Outcome Creek Ranchettes II HOA c/o Vision Community Mgmt 1625 S. Deset Foothills Prwy. Phoenix A2 53048-9927         Insure model					E-MAII			010 00	0 12/0		
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Phoenix AZ 85048-9927       Insure RE:       Insure R:         COVERAGES       CERTIFICATE NUMBER: 190552300       REVISION NUMBER: NUMBER: 190552300       REVISION NUMBER: NUMBER: 190552300         THIS IS TO CERTIFY THAT THE FOLDEDE OF INSURANCE LISTE D BELOW HAVE BEEN ISSUED TO THE INSURED NAME D ABOVE FOR THE FOLCY PERIOD NUMCHT THIS MONTHYST KAMONG ANY REQUIREMENT. TERM (OCOMPITION OF ANY CONTRACT OR OTHER DOCLARMS. NUMERON NUM HAVE BEEN ISSUED TO THE INSURED TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH FOLICIES LISTS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMS.         NMM       TYPE OF INSURANCE       INSURE POLICY MANDER       BOOLY AND CONTRACT OR OTHER DOCLARMS.         LINT       A       X       COMMERCIAL GENERAL LISTS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMS.       INSURE E ISSUED TO ALL THE TERMS, EXCLUSIONS AND CONDUCTION SO SUCH FOLICIONS OF DOLEY MANDER       INSURE E ISSUED TO ALL THE TERMS, EXCLUSIONS AND CONDUCED BY PAID CLAMS.         LINT       A       X       COMMERCIAL GENERAL LISTS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMS.       INTO CAMES.         LINT       INA       INA       INA       INA       INA       INA       INA         LINT       INA       INA       INA       INA       INA       INA       INA         LINT       INA       INA <t< td=""><td>c/o \</td><td>/ision Community Mgmt</td><td></td><td></td><td>INSURER C :</td><td></td><td></td><td></td><td></td></t<>	c/o \	/ision Community Mgmt			INSURER C :						
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ITR     TYPE OF INSURANCE     INSD     POLICY NUMBER     (MMDDPYYY)     MMDDPYYY)     CLAINS       A     X     COMMERCIAL GENERAL LABUITY     Y     HOA1000013305-02     6/24/2025     6/24/2026     6/24/2026     EACH-OCCURRENCE     \$ 1000.000       MEDIARD     X     OCCURR     Y     HOA1000013305-02     6/24/2025     6/24/2026     6/24/2026     MMDDPYYY)     MMDDPYYY)     MMDDPYYY)       GEN1 AGGREGATE INIT APPLIES PER:     V     HOA1000013305-02     6/24/2025     6/24/2026     6/24/2026     FERSIONAL ADV INUEY     \$ 5.000       A     AUTOMOBILE LABUITY     HOA1000013305-02     6/24/2025     6/24/2026     6/24/2026     SINGLE LIMIT     \$ 1.000.000       MYRED     MOREDWAY     SUFEDULED     N/A     HOA1000013305-02     6/24/2025     6/24/2026     SOULY NURY (Per porten)     \$       A     MUTO     SUFEDULED     N/A     N/A     SOULY NURY (Per porten)     \$     SOULY NURY (Per porten)     \$       A     MUTOS ONLY     X     N/ASO NUREY     N/A     HOA1000013305-02     6/24/2025     6/24/2026     SOULY NURY (Per porten)     \$       A     MUTOS ONLY     X     N/ASO NURY     X     N/A     S     S       Deb     RECENTIONS     CLIMIS ADAUE     S <t< td=""><td colspan="9">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,</td></t<>	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,										
CLAMMS-MADE       X       OCCUR       Store       Store         CENT AGGREGATE LIMIT APPLIES PER:       Intervention       Store       Store         CENT AGGREGATE LIMIT APPLIES PER:       Intervention       Store       PROVE       Store         CENT AGGREGATE LIMIT APPLIES PER:       Intervention       Store       Store       PROVE       Store       Store         CENT AGGREGATE LIMIT APPLIES PER:       Intervention       Store       Store       PROVE       Store       Store       Store       PROVE       Store       Store       Store       PROVENTY       Store       Store <td>INSR LTR</td> <td>TYPE OF INSURANCE</td> <td></td> <td></td> <td>POLICY EFF (MM/DD/YYYY)</td> <td>OLICY EXP</td> <td>LIMIT</td> <td>S</td> <td></td>	INSR LTR	TYPE OF INSURANCE			POLICY EFF (MM/DD/YYYY)	OLICY EXP	LIMIT	S			
CLAMIS-MADE       COCUR         GENL AGGREGATE LIMIT APPLIES PER:       MED EXP (Ayone person)       \$ 50,000         COMENCIAL AGREGATE LIMIT APPLIES PER:       Note that the second of the s	А	X COMMERCIAL GENERAL LIABILITY	Y	HOA1000013305-02	6/24/2025	6/24/2026		\$ 1,000	,000		
MED EXP (Any one period)       \$ 5.00         GENL AGGREGATE LIMIT APPLIES PER:       PROLOCY       PERSONAL & ADV INURY       \$ 1.000.000         GENL AGGREGATE LIMIT APPLIES PER:       LOC       PROLOCY       \$ 2.000.000         OTHER:       AUTOMORELIABILITY       HOA1000013305-02       6/24/2026       6/24/2026       6/24/2026       SOMEDULED         AUTOMORELIABILITY       HOA1000013305-02       6/24/2026       6/24/2026       6/24/2026       SOMEDULED       SOMEDULED         AUTOMORELIABILITY       HOA1000013305-02       6/24/2026       6/24/2026       6/24/2026       SOMEDULED       SOMEDULED         OWNED OWLY       XONOWNED AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       BOOLL'NULY (Per perion)       S         VORKERS COMPENSATION       AUTOS ONLY       AUTOS ONLY       AGGREGATE       S         OED RETENTIONS       CLAIMS MADE       S       S       S         WORKERS COMPENSATIONS       HOA1000013305-02       6/24/2025       6/24/2026       S       S         WORKERS COMPENSATIONS       HOA1000013305-02       6/24/2025       6/24/2026       S       S       S         WORKERS COMPENSATIONS       HOA1000013305-02       6/24/2025       6/24/2026       S       S       S       S       S		CLAIMS-MADE X OCCUR						\$ 100,0	00		
Image: Internet i							, , , , , , , , , , , , , , , , , , , ,	\$ 5,000			
GENL AGGREGATE LIMIT APPLES PER:											
X       POLICY       PRC       Loc       PRODUCTS - COMPIOP AGG       \$2,000,000         OTHER:       A       AVTOMOBILE LIABILITY       HOA1000013305-02       6/24/2025       6/24/2025       6/24/2026       6/24/2026       BODLY NULRY (Per person)       \$         OWNED AVTOS ONLY       AUTOS											
A       AUTOMOBILE LABILITY       HOA1000013305-02       6/24/2025       6/24/2025       6/24/2025       6/24/2026       6/24/2026       6/24/2026       6/24/2026       6/24/2026       6/24/2026       8       0DULY INURY (Per percent)       8         A       ANY AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       S       0DULY INURY (Per percent)       8         A       MUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       S       0DULY INURY (Per percent)       8         UMBRELLALIAB       OCCUR       AUTOS ONLY       AUTOS ONLY       S       0DULY INURY (Per percent)       8         DED       RETENTION \$       OCCUR       AUTOS ONLY       AUTOS ONLY       S       0         WORKERS COMPENSATION       OCCUR       CLAIMS-MADE       S       0 <td></td> <td>Y PRO-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>• ,</td> <td>,</td>		Y PRO-						• ,	,		
AUTOMOBILE LABILITY       HOA1000013305-02       6/24/2025       6/24/2025       6/24/2026       COMENTED SINCE LIMIT       \$ 1.000,000         ANY AUTO       ANY AUTO       ANY AUTO       BODILY INURY (Per person)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       BODILY INURY (Per academ)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       \$       BODILY INURY (Per academ)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       \$       BODILY INURY (Per academ)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       \$       BODILY INURY (Per academ)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       \$       \$       BODILY INURY (Per academ)       \$         MURRELLALIAB       OCCUR       CLAIMS-MADE       \$ <t< td=""><td>-</td><td></td><td></td><td></td><td></td><td></td><td>PRODUCTS - COMP/OP AGG</td><td>. ,</td><td>,000</td></t<>	-						PRODUCTS - COMP/OP AGG	. ,	,000		
A       A Ordendale Laturation       A 10000013300-02       024/2020       024/2020       1024/		•		11041000012205 02	6/04/2025	6/24/2026	COMBINED SINGLE LIMIT		000		
AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       BODILY INJURY (Per accident)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       BODILY INJURY (Per accident)       \$         AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       \$       BODILY INJURY (Per accident)       \$         Image: Construction of the state of the st				HOA1000013305-02	6/24/2025	6/24/2026	(Ea accident)	. , ,			
AUTOS ONLY       X       AUTOS       NUY	-						,	-			
A JUTOS ONLY       AUTOS ONLY       AUTOS ONLY       AUTOS ONLY       Image: Comparison of the symbol o	_	AUTOS ONLY AUTOS					, , ,	-			
Image: state of the state								\$			
EXCESS LIAB       CLAINS-MADE       3         DED       RETENTIONS       AGGREGATE       \$         ANDE DUPOYERS' LIABILITY       Y/N       N/A       \$         ANYPROPRIETOR/PARTNER/VECUTIVE       Y/N       N/A       \$         DESCRIPTION OF OPERATIONS/Additionally Unsured       Y       N/A       \$         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)       \$       \$         DESCRIPTION OF operational y is Additionally Insured on the General Liability, D&O Liability, and Fidelity-Crime.       \$       \$         DESCRIPTICATE HOLDER       CANCELLATION       CANCELLATION       \$         CERTIFICATE HOLDER       CANCELLATION       S       \$         Management Company is Additionally Insured on the General Liability, D&O Liability, and Fidelity-Crime.       \$ <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>\$</td><td></td></td<>								\$			
Image: Decompensation and provide the second sec		UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$			
WORKERS COMPENSATION AND EMPLOYERS' LUBILITY AND PROPRIETOR/PAS' LUBILITY OFFICERMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below       N / A       Image: Compension of the c		EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$			
ANYPROPRIETIOR PARTINERVEXECUTIVE       Y/N       N/A         ANYPROPRIETIOR PARTINERVEXECUTIVE       N/A       E.L. EACH ACCIDENT       \$         EL. DISEASE - EA EMPLOYEE       \$       E.L. DISEASE - EA EMPLOYEE       \$         If yes, describe under DESCRIPTION OF OPERATIONS / below       Y       HOA1000013305-02 HOA1000013305-02 6/24/2025       6/24/2025 6/24/2026       6/24/2026 6/24/2026       \$1.000 deductible \$1.000 deductible       \$55.000 \$25.0000 \$1.000 deductible       \$55.000 \$2.0000 \$1.000 deductible       \$55.000 \$2.0000 \$1.000 deductible       \$55.000 \$1.000 deductible <td></td> <td>DED RETENTION \$</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>\$</td> <td></td>		DED RETENTION \$						\$			
ANYPROPRIETIOR PARTINERVEXECUTIVE       Y/N       N/A         ANYPROPRIETIOR PARTINERVEXECUTIVE       N/A       E.L. EACH ACCIDENT       \$         EL. DISEASE - EA EMPLOYEE       \$       E.L. DISEASE - EA EMPLOYEE       \$         If yes, describe under DESCRIPTION OF OPERATIONS / below       Y       HOA1000013305-02 HOA1000013305-02 6/24/2025       6/24/2025 6/24/2026       6/24/2026 6/24/2026       \$1.000 deductible \$1.000 deductible       \$55.000 \$25.0000 \$1.000 deductible       \$55.000 \$2.0000 \$1.000 deductible       \$55.000 \$2.0000 \$1.000 deductible       \$55.000 \$1.000 deductible <td colspan="2">WORKERS COMPENSATION</td> <td></td> <td></td> <td></td> <td></td> <td>PER OTH- STATUTE ER</td> <td></td> <td></td>	WORKERS COMPENSATION						PER OTH- STATUTE ER				
OFFICER/MEMBER EXCLUDED?       N/A       EL. DISEASE - EA EMPLOYEE       EL. DISEASE - EA EMPLOYEE       Image: EL. DISEASE - FACUPCY LIMIT       Image: EL. DISEASE - FAC		T/N						\$			
If yes, describe under DESCRIPTION OF OPERATIONS below       Image: Constant of the state of th	(	OFFICER/MEMBER EXCLUDED?	N/A					-			
A       Property Crime / Fidelity Directors & Officers       Y       Y       HOA1000013305-02 HOA1000013305-02 619020896       6/24/2025 6/24/2025 6/24/2025       6/24/2026 6/24/2026       \$1,000 deductible \$1,000 deductible	i	f ves, describe under						\$			
A       Crime / Fidelity Directors & Officers       Y       HOA1000013305-02 619020896       6/24/2025 6/24/2025       6/24/2026 6/24/2026       \$1,000 deductible \$1,000 deductible       \$250,000 \$1,000,000         DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES HOA consists of 58 Units. Located in Queen Creek, AZ.       Additional Remarks Schedule, may be attached if more space is required)         Management Company is Additionally Insured on the General Liability, D&O Liability, and Fidelity-Crime.         See 2nd page of certificate of insurance for further coverage information.         See Attached         CERTIFICATE HOLDER       CANCELLATION         Should Any OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN	A	Property		HOA1000013305-02	6/24/2025	6/24/2026	\$1,000 Deductible				
HOA consists of 58 Units. Located in Queen Creek, AZ. Management Company is Additionally Insured on the General Liability, D&O Liability, and Fidelity-Crime. See 2nd page of certificate of insurance for further coverage information. See Attached CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN	A	Crime / Fidelity	Y Y	HOA1000013305-02	6/24/2025	6/24/2026	\$1,000 deductible	\$250,	000		
HOA consists of 58 Units. Located in Queen Creek, AZ. Management Company is Additionally Insured on the General Liability, D&O Liability, and Fidelity-Crime. See 2nd page of certificate of insurance for further coverage information. See Attached CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					le, may be attached if mo	re space is requir	ed)				
See 2nd page of certificate of insurance for further coverage information.          See Attached         CERTIFICATE HOLDER         CANCELLATION         SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN											
See 2nd page of certificate of insurance for further coverage information.          See Attached         CERTIFICATE HOLDER         CANCELLATION         SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN	Man	agement Company is Additionally Insur	ed on t	the General Liability. D&O I ial	bility, and Fidelity-C	rime.					
See Attached  CERTIFICATE HOLDER  CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					.,,						
CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN	See	2nd page of certificate of insurance for	further	coverage information.							
CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN											
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SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN											
THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN	CERTIFICATE HOLDER CANCELLATION										
16625 S. Desert Foothills Pkwy		16625 S. Desert Foothills F	ment Ykwy								
USA	1										
C TOHANK					( TOWK	( DHCK					
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AGENCY CUSTOMER ID: QUEECRE-03

LOC #:

FORM NUMBER:

## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY LaBarre/Oksnee Insurance	NAMED INSURED Queen Creek Ranchettes II HOA c/o Vision Community Mgmt 16625 S. Desert Foothills Pkwy. Phoenix AZ 85048-9927					
POLICY NUMBER						
CARRIER	NAIC CODE					
		EFFECTIVE DATE:				
ADDITIONAL REMARKS						
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,						

25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

Coverage is for COMMON AREAS ONLY

Coverage Includes: Special Form with 100% Replacement Cost Property Limit of \$25,000 for Trees/Shrubs Wind/Hail (excludes direct loss to Trees/Shrubs) Building Ordinance or Law Severability of Interest / Separation of Insureds No Co-Insurance D&O is a Claims-Made Policy

ACORD 101 (2008/01)