



CERTIFICATE OF INSURANCE

This certifies that

- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois
STATE FARM FIRE AND CASUALTY COMPANY, Aurora, Ontario
STATE FARM FLORIDA INSURANCE COMPANY, Winter Haven, Florida
STATE FARM LLOYDS, Dallas, Texas

insures the following policyholder for the coverages indicated below:

Policyholder: SPORTSTEC, INC
Address of policyholder: 2310 E PONDEROSA DR STE 24 CAMARILLO, CA 93010
Location of operations: 2310 E PONDEROSA DR STE 24 CAMARILLO, CA 93010
Description of operations: Additional Insured : Stephen F. Austin State University

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms, exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

Table with columns: POLICY NUMBER, TYPE OF INSURANCE, POLICY PERIOD (Effective Date, Expiration Date), LIMITS OF LIABILITY (at beginning of policy period). Includes rows for Comprehensive Business Liability, Workers' Compensation and Employers Liability, and Excess Liability.

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

Name and Address of Certificate Holder
STEPHEN F. AUSTIN STATE UNIVERSITY
PROCUREMENT & PROPERTY SERVICES
PO BOX 13030
NACCGDOCHES, TEXAS 75962

If any of the described policies are canceled before their expiration date, State Farm will try to mail a written notice to the certificate holder days before cancellation. If however, we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

Signature of Authorized Representative
AGENT: SHIRLEY B BRANDON
Date: 09/20/2011
Agent Name: SHIRLEY B BRANDON
Telephone Number: 805-484-4388

Agent's Code Stamp
Agent Code: BRANDON
AFO Code: INSURANCE
BRANDON INSURANCE AGENCY, INC.
LIC. # 0H08183
2412 N PONDEROSA DRIVE #B109
CAMARILLO, CA 93010
805-484-4388



Policy No.: 90 XK9500 1

FE-6609



## SECTION II ADDITIONAL INSURED ENDORSEMENT

Policy No.: 90 XK9500 1

Named Insured: SPORTSTEC INC

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**Additional Insured (include address):**

STEPHEN F. AUSTIN STATE UNIVERSITY PROCUREMENT & PROPERTY SERVICES  
P.O. BOX 13030  
NACOGDOCHES, TEXAS 75962

**WHO IS AN INSURED**, under SECTION II DESIGNATION OF INSURED, is amended to include as an insured the Additional Insured shown above, but only to the extent that liability is imposed on that Additional Insured solely because of your work performed for that Additional Insured shown above.

Any insurance provided to the Additional Insured shall only apply with respect to a claim made or a suit brought for damages for which you are provided coverage.

The Primary Insurance coverage below applies only when there is an "X" in the box.

**Primary Insurance.** The insurance provided to the Additional Insured shown above shall be primary insurance. Any insurance carried by the Additional Insured shall be noncontributory with respect to coverage provided to you.

All other policy provisions apply.