

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/09/2020

<u> </u>											
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).											
PRC	DDUCER Marsh Risk & Insurance Services			NAME:							
	1735 Technology Drive, Suite 790			PHONE FAX (A/C, No, Ext): (A/C, No):							
	San Jose, CA 95110			E-MAIL ADDRESS:							
				INSURER(S) AFFORDING COVERAGE NAIC #							
CN1	117631842GAWUE-19-20	INSURER A : Travelers Property Casualty Co. of America				25674					
INS	URED		INSURER B : ACE American Insurance Company				22667				
	Zoom Video Communications, Inc.							19038			
	55 Almaden Blvd Fl 6 San Jose, CA 95113-1612			INSURER C : Travelers Casualty And Surety Company				17030			
				INSURER D :							
				INSURER E :							
				INSURER F :							
			NUMBER:	SEA-003692284-01 REVISION NUMBER: 3							
11	THIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY REC CERTIFICATE MAY BE ISSUED OR MAY P	QUIREMEN	NT, TERM OR CONDITION	OF ANY CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC	тто	WHICH THIS			
	EXCLUSIONS AND CONDITIONS OF SUCH P	OLICIES.	LIMITS SHOWN MAY HAVE								
INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	3				
Α	X COMMERCIAL GENERAL LIABILITY		630-P556136	11/01/2019	11/01/2020	EACH OCCURRENCE	\$	1,000,000			
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000			
	Global Extension					MED EXP (Any one person)	\$	10,000			
	Host Liquor					PERSONAL & ADV INJURY	\$	1,000,000			
							<u> </u>	2,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC					GENERAL AGGREGATE		2,000,000			
						PRODUCTS - COMP/OP AGG Employee Benefits	\$ \$	3,000,000			
A	OTHER: AUTOMOBILE LIABILITY		BA-2P564216	11/01/2019	11/01/2020	COMBINED SINGLE LIMIT	\$				
1			5/12/1001210	1110112017	11/01/2020	(Ea accident)	•	1,000,000			
	X ANY AUTO					BODILY INJURY (Per person)	\$				
	AUTOS ONLY AUTOS					BODILY INJURY (Per accident) PROPERTY DAMAGE	\$				
	X HIRED X NON-OWNED AUTOS ONLY					(Per accident)	\$				
						Medical Payments Each	\$	10,000			
A	X UMBRELLA LIAB X OCCUR		CUP-2P57290A	11/01/2019	11/01/2020	EACH OCCURRENCE	\$	25,000,000			
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$	25,000,000			
	DED X RETENTION \$0						\$				
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		UB-2P566720	11/01/2019	11/01/2020	X PER OTH- STATUTE ER					
С	ANYPROPRIETOR/PARTNER/EXECUTIVE		UB-3P021140	11/01/2019	11/01/2020	E.L. EACH ACCIDENT	\$	1,000,000			
	OFFICER/MEMBER EXCLUDED?	N/A				E.L. DISEASE - EA EMPLOYEE	\$	1,000,000			
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT		1,000,000			
В	E&O / Cyber Liability		D95133472	11/01/2019	11/01/2020	Limit	*	10,000,000			
⊨											
	SCRIPTION OF OPERATIONS / LOCATIONS / VEHICLE Evidence of insurance	ES (ACORD	101, Additional Remarks Schedu	le, may be attached if more	e space is requir	ed)					
Re:											
CE	CERTIFICATE HOLDER			CANCELLATION							
	Georgia Technology Authority						NO				
	47 Trinity Avenue SW		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN								
	Atlanta, GA 30334		ACCORDANCE WITH THE POLICY PROVISIONS.								
				AUTHORIZED REPRESE of Marsh Risk & Insura							
				Petronella Massey		Detronella Mas	sey	-			

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AGENCY CUSTOMER ID: CN117631842

LOC #: San Jose

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ACORD	

ADDITIONAL REMARKS SCHEDULE

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AGENCY Marsh Risk & Insurance Services	NAMED INSURED Zoom Video Communications, Inc. 55 Almaden Blvd FI 6				
POLICY NUMBER		San Jose, CA 95113-1612			
CARRIER	NAIC CODE				
		EFFECTIVE DATE:			

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

CRIME

A: Berkley Insurance Company Policy No: BCCR - 45003741-20 Effective 10/31/2019 Expire 12/01/2020 Limit:

\$1,000,000