DGK INSURANCE & FINANCIAL SERVICES
P.O. Box 337, Factoryville, PA 18419

Phone: (570) 945-3031 • 1 (800) 242-4337 • Fax: (570) 945-7279
www.dgkinsurance.com E-mail: info@dgkinsurance.com

Monday, October 03, 2022

Newton Lake Association
c/o Frank Ruggiero
960 Scranton Carbondale Hwy
Archbald, PA 18403

Re: Current Renewal Policy

Dear Frank:

Thank you for being our customer. Enclosed please find your renewal policy for the current term.

We are held responsible to the insurance company for the premium from the effective date, so if the protection is not desired please return the policy at once.
Additionally, if there are any changes please call so we may endorse the policy. Our office hours are 8:30 a.m. to 5:00 p.m. Monday through Friday.

We trust you will find this insurance satisfactory, and you may rest assured your interests shall always have our prompt and efficient attention.

Your business is greatly appreciated. We recognize there are many options to choose from, and we are honored that you selected us. If you have any questions, please feel free to contact me.

Sincerely,

Ronda Macedonio

RONDA MACEDONIO CPCU,AIS,AIC,AIM,ASLI,AU
Commercial Team Leader, EXT. 249

P.S. Our agency grows through referrals from satisfied customers like you. If you have a friend or associate who could benefit from the service we provide, please call me today.

Enclosures: Invoice & Policy(ies)

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---------- INVOICE ----------

Newton Lake Association
c/o Frank Ruggiero
960 Scranton Carbondale Hwy
Archbald, PA 18403

Named Insured: NEWTON LAKE ASSOCIATION

Invoice Date	10/03/22
Invoice No.	423519
Bill-To Code	1NEWTONLAKEASSO
Client Code	1NEWTONLAKEASSO
Inv Order No.	1*391135

Amount Remitted: $

Please return this portion with your payment.

Make checks payable to: DGK Insurance

Effective Date	Policy Period	Coverage Description	Transaction Amount
10/16/22	10/16/22 to 10/16/23	United States Liability Ins Co/ c/o Policy No. NDO1571247F *Renewal - DIRECTORS & OFFICERS	1,698.00
		POLICY FEE - DIRECTORS & OFFICERS	75.00
		THANK YOU FOR YOUR BUSINESS! PLEASE MAKE YOUR CHECK PAYABLE TO DGK INSURANCE. PAYMENT IS DUE UPON RECEIPT.	
		Invoice Number: 423519 Amount Due:	1,773.00

***Premiums Due and Payable on Effective Date**

NON PROFIT MANAGEMENT LIABILITY COVERAGE PART DECLARATIONS

PLEASE READ YOUR POLICY CAREFULLY.

THIS IS A CLAIMS MADE POLICY COVERAGE FORM AND UNLESS OTHERWISE PROVIDED HEREIN, THE COVERAGE OF THIS FORM IS LIMITED TO LIABILITY FOR CLAIMS FIRST MADE DURING THE POLICY PERIOD, OR THE EXTENSION PERIOD, IF APPLICABLE. DEFENSE COSTS SHALL BE APPLIED AGAINST THE RETENTION.

No. NDO1571247F

Effective Date: **10/16/2022**
12:01 AM STANDARD TIME

ITEM I. PARENT ORGANIZATION AND PRINCIPAL ADDRESS

NEWTON LAKE ASSOCIATION
C/O FRANK RUGGIERO
960 SCRANTON CARBONDALE HWY
ARCHBALD, PA 18403

ITEM II. POLICY PERIOD: (MM/DD/YYYY) From: 10/16/2022 To: 10/16/2023

Non Profit Directors and Officers Liability Coverage Part

ITEM III. LIMITS OF LIABILITY

a. Non Profit Directors & Officers	$3,000,000	EACH CLAIM
b. Non Profit Directors & Officers	$3,000,000	IN THE AGGREGATE

ITEM IV. RETENTION:	$0	EACH CLAIM
ITEM V. PREMIUM:	$1,698	
RETROACTIVE DATE:	Full Prior Acts	
PRIOR OR PENDING LITIGATION	See form DO-298	

Employment Practices Liability Coverage Part

ITEM III. LIMITS OF LIABILITY

a. Employment Practices	NOT COVERED
b. Employment Practices	
ITEM IV. RETENTION:	NOT COVERED
ITEM V. PREMIUM:	NOT COVERED

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.