**STATE OF GEORGIA**  
**DEPARTMENT OF ADMINISTRATIVE SERVICES**  
**CERTIFICATE OF INSURANCE**

### Name and Address of Agency
- **Department of Administrative Services**  
- **Risk Management Services**  
- **200 Piedmont Avenue SE**  
- **Suite 1220 West Tower**  
- **Atlanta, Georgia 30334-9010**

### Name and Address of Insured
- **BOR: Augusta University**  
- **1120 15th Street - HS-1111**  
- **Augusta, GA 30912**

### Coverages Afforded By:

<table>
<thead>
<tr>
<th>Company Letter</th>
<th>Company</th>
<th>Policy Number</th>
<th>Policy Expires</th>
<th>Limits Apply Separately Per Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Great American Insurance Company</td>
<td>CGL 401-14-24</td>
<td>6/30/2024</td>
<td>PER PERSON $1,000,000</td>
</tr>
<tr>
<td>C</td>
<td></td>
<td></td>
<td></td>
<td>AGGREGATE $3,000,000</td>
</tr>
<tr>
<td>D</td>
<td></td>
<td></td>
<td></td>
<td>OCCURRENCE POLICIES (X)</td>
</tr>
</tbody>
</table>

### COMPANY LETTER

<table>
<thead>
<tr>
<th>LETTER</th>
<th>TYPES OF INSURANCE</th>
<th>POLICY NUMBER</th>
<th>POLICY EXPIRES</th>
<th>LIMITS APPLY SEPARATELY PER POLICY</th>
</tr>
</thead>
</table>
| A      | COV. LIABILITY (GL, MEDICAL MALPRACTICE)  
A        | TORT CLAIMS LIABILITY POLICY.  
B        | EMPLOYEE LIABILITY POLICY.  
C        | STATE AUTHORITY POLICY.  
D        | **Contractual and/or Additional Insured Coverage applies to Certificate Holder if policy A B C is checked**  
E        | **Physical Damage Coverage**  
F        | **Excess Authority Coverage when Authority is sued in federal court**  
G        | **Excess Contractual and/or additional insured coverage when certificate holder is sued in federal or state court** |
| A      | **WORKER’S COMP. COVERAGE** SELF-INSURED | **None** | **Statute** |
| B      | COV. MISCELLANEOUS COVERAGE  
I        | Property  
J        | Other | **Fidelity Bond** |

### DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES
Contractual Liability is NOT provided and the Certificate Holder is NOT an additional insured. Coverage applies to state employees while performing state assigned duties.

### CANCELLATION:
In the event of cancellation of the policy(ies) described herein, Risk Management Services will endeavor to provide _____ 30 _______ days written notice to the certificate holder, however Risk Management Services assumes no legal responsibility for failure to do so.

**DATE ISSUED: 06/06/2023**

**AUTHORIZED REPRESENTATIVE**
June 28, 2023

Re: State of Georgia Self-Insurance Programs

To Whom It May Concern:

Please be advised, the Georgia Tort Claims Act (O.C.G.A. 50-21-20 et seq.) provides a limited waiver of sovereign immunity for claims against the State of Georgia arising from certain negligent acts or omissions of ‘state officers or employees’ up to a maximum damage amount of $1,000,000 per person, $3,000,000 per occurrence. The Georgia Tort Claims Act mandates that the department of Administrative Services insures or self-insures and administers all claims brought against a state agency or agencies under this Act.

If a claim brought under the Georgia Tort Claims Act goes into litigation, the State Attorney General’s Office has primary control over the case and constitutionally is only able to provide counsel for state agencies and their employees.

Accordingly, as a general rule, the State of Georgia will not add a private, non-state entity or individual as an additional insured and/or loss payee under the state’s self-insurance programs administered by the Department of Administrative Services.

Should you have any further questions, please do not hesitate to contact me.

Sincerely,

Wade E. Damron
Director
DOAS, Risk Management Services Division