



ADDITIONAL INTEREST SCHEDULE

DATE (MM/DD/YYYY)
2/23/2021

AGENCY FL Dean Tom Wojciechowski		CARRIER United States Fire Insurance Company		NAIC CODE 21113
POLICY NUMBER SRPGAPML-101-0719/USP319417		EFFECTIVE DATE 05/28/2020 12:01 AM	NAMED INSURED(S) Oklahoma Fadeaway Hoops	

ADDITIONAL INTEREST (Not all fields apply to all scenarios – provide only the necessary data)

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Columbus Corporation of Oklahoma 6300 N Santa Fe. Oklahoma City, OK 73118						LOCATION:	BUILDING:
<input type="checkbox"/> BEACH OF WARRANTY							VEHICLE:	BOAT:
<input type="checkbox"/> CO-OWNER							AIRPORT:	AIRCRAFT:
<input type="checkbox"/> EMPLOYEE AS LESSOR							ITEM CLASS:	ITEM:
<input type="checkbox"/> LEASEBACK OWNER							ITEM DESCRIPTION	
<input type="checkbox"/> LIENHOLDER	REFERENCE / LOAN #:	INTEREST END DATE:						
	LIEN AMOUNT:	PHONE (A/C, No, Ex):		FAX (A/C, No):				
REASON FOR INTEREST:				E-MAIL ADDRESS:				

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Lighthouse Fitness Sports, Fitness and Health 3333 W. Hefner Rd. Oklahoma City, OK 73120						LOCATION:	BUILDING:
<input type="checkbox"/> BEACH OF WARRANTY							VEHICLE:	BOAT:
<input type="checkbox"/> CO-OWNER							AIRPORT:	AIRCRAFT:
<input type="checkbox"/> EMPLOYEE AS LESSOR							ITEM CLASS:	ITEM:
<input type="checkbox"/> LEASEBACK OWNER							ITEM DESCRIPTION	
<input type="checkbox"/> LIENHOLDER	REFERENCE / LOAN #:	INTEREST END DATE:						
	LIEN AMOUNT:	PHONE (A/C, No, Ex):		FAX (A/C, No):				
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INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Santa Fe Family Life Center 6300 N. Santa Fe Ave. Oklahoma City, OK 73118						LOCATION:	BUILDING:
<input type="checkbox"/> BEACH OF WARRANTY							VEHICLE:	BOAT:
<input type="checkbox"/> CO-OWNER							AIRPORT:	AIRCRAFT:
<input type="checkbox"/> EMPLOYEE AS LESSOR							ITEM CLASS:	ITEM:
<input type="checkbox"/> LEASEBACK OWNER							ITEM DESCRIPTION	
<input type="checkbox"/> LIENHOLDER	REFERENCE / LOAN #:	INTEREST END DATE:						
	LIEN AMOUNT:	PHONE (A/C, No, Ex):		FAX (A/C, No):				
REASON FOR INTEREST:				E-MAIL ADDRESS:				

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Prestonwood Sports Fitness Center and Baptist Church 6801 W. Park Blvd. Plano, TX 75093						LOCATION:	BUILDING:
<input type="checkbox"/> BEACH OF WARRANTY							VEHICLE:	BOAT:
<input type="checkbox"/> CO-OWNER							AIRPORT:	AIRCRAFT:
<input type="checkbox"/> EMPLOYEE AS LESSOR							ITEM CLASS:	ITEM:
<input type="checkbox"/> LEASEBACK OWNER							ITEM DESCRIPTION	
<input type="checkbox"/> LIENHOLDER	REFERENCE / LOAN #:	INTEREST END DATE:						
	LIEN AMOUNT:	PHONE (A/C, No, Ex):		FAX (A/C, No):				
REASON FOR INTEREST:				E-MAIL ADDRESS:				

INTEREST	NAME AND ADDRESS	RANK:	EVIDENCE:	CERTIFICATE	POLICY	SEND BILL	INTEREST IN ITEM NUMBER	
<input checked="" type="checkbox"/> ADDITIONAL INSURED	Prestonwood Sports Fitness Center and Baptist Church 6801 W. Park Blvd. Plano, TX 75093						LOCATION:	BUILDING:
<input type="checkbox"/> BEACH OF WARRANTY							VEHICLE:	BOAT:
<input type="checkbox"/> CO-OWNER							AIRPORT:	AIRCRAFT:
<input type="checkbox"/> EMPLOYEE AS LESSOR							ITEM CLASS:	ITEM:
<input type="checkbox"/> LEASEBACK OWNER							ITEM DESCRIPTION	
<input type="checkbox"/> LIENHOLDER	REFERENCE / LOAN #:	INTEREST END DATE:						
	LIEN AMOUNT:	PHONE (A/C, No, Ex):		FAX (A/C, No):				
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							LOCATION:	BUILDING:
<input checked="" type="checkbox"/> ADDITIONAL INSURED	The Gate Church 7700 N. Council Rd Oklahoma City , OK 73132						VEHICLE:	BOAT:
<input type="checkbox"/> BEACH OF WARRANTY							AIRPORT:	AIRCRAFT:
<input type="checkbox"/> CO-OWNER							ITEM CLASS:	ITEM:
<input type="checkbox"/> EMPLOYEE AS LESSOR							ITEM DESCRIPTION	
<input type="checkbox"/> LEASEBACK OWNER							REFERENCE / LOAN #:	INTEREST END DATE:
<input type="checkbox"/> LIENHOLDER							LIEN AMOUNT:	PHONE (A/C, No, Ex):
REASON FOR INTEREST:			E-MAIL ADDRESS:					

The above are added as additional insured but only with respect to liability arising out of operations of the named insured during the policy period.