



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

6/30/2023

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY Alliant Insurance Services, Inc. 560 Mission Street, 6th Floor San Francisco, CA 94105		PHONE (A/C, No, Ext): 415-403-1400	COMPANY Berkshire Hathaway Specialty Insurance	
FAX (A/C, No): 415-874-4810	E-MAIL ADDRESS: vrin@alliant.com			
CODE:	SUB CODE:			
AGENCY CUSTOMER ID #:		LOAN NUMBER		POLICY NUMBER APIP2324
INSURED CSU, Los Angeles Corporate Yard (CY) Building, Room 244 5151 State University Drive Los Angeles, CA 90032		EFFECTIVE DATE 07/01/2023	EXPIRATION DATE 07/01/2024	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION

LOCATION/DESCRIPTION

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	SPECIAL	X	ALL RISK
COVERAGE / PERILS / FORMS						
All Risk Of Direct Physical Loss Or Damage Including Flood At Locations Per Schedule On File With Company Repair or Replacement Cost Valuation Subject to Policy Provisions Subject To Policy Terms, Conditions And Exclusions						AMOUNT OF INSURANCE \$25,000,000 Loss Limit Per Occurrence Flood \$50,000,000 Per Occ. & Annual Agg
						DEDUCTIBLE See Below

REMARKS (Including Special Conditions)

Deductibles: Subject to Scheduled Locations Only
 All Risk: \$100,000 Per Occurrence
 Flood: \$2,500,000 Per Occurrence - Flood Zones A & V; \$2,500,000 Per Occurrence - All Other Flood Zones
 Evidence of coverage as respects the Equipment Loan Agreement for lease of following equipment. Term of Agreement: February 1, 2023 - February 1, 2024.

 One (1) Mass Spectrum, LECO Pegasus BT 4D GCxGC TOF System, Item No. BT4DLN889032D. TIV: \$238,390.00.
 One (1) Autosamplers, GC AutoSampler for Liquid and SPME Injections, Item No. 709-815-713. TIV: \$64,290.00.
 One (1) Thermal Desorption Unit, Item No. 999-TD. TIV: \$53,000.00.

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS LECO Corporation 3000 Lakeview Avenue St. Joseph, MI 49085	<input type="checkbox"/> ADDITIONAL INSURED	<input type="checkbox"/> LENDER'S LOSS PAYABLE	<input type="checkbox"/> LOSS PAYEE
	<input type="checkbox"/> MORTGAGEE		
	LOAN #		
AUTHORIZED REPRESENTATIVE 			