

Jodi C Harriman PO Box 2950 Hartford, CT 06104-2950

VERIFICATION CERTIFICATE

| | | I | License No. N/A | |
|-----------------------|----------------------------|---|------------------|--------|
| Bond No.: 107859895 | | | | |
| THIS IS TO CERTIFY t | hat the above referenced B | • | | |
| June 6, 2025 | | y and Surety Company of America One Million | , | dated |
| (\$1,000,000.00) on | behalf of | | | |
| | | | | |
| and in favor of | | County of Durham | (as Obli | igee), |
| | April 23, 2025 | ons and limitations. | | |
| | | Travelers Casualty and Surety Con | mpany of America | |
| | Ву | Attorney-in-Fact | | |
| | | · · · · · · · · · · · · · · · · · · · | | |

This notice provides no coverage, nor does it change any policy terms. To determine the scope of coverage and the insured's rights and duties under the policy, read the entire policy carefully. For more information about the content of this notice, the insured should contact their agent or broker. If there is any conflict between the policy and this notice, the terms of the policy prevail.

Independent Agent And Broker Compensation Notice

For information on how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website: www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html.

Or write or call:

Travelers, Agency Compensation One Tower Square Hartford, Connecticut 06183

(866) 904.8348

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