## **MGALVAN**

CORD

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/10/2014

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

			(-)		-							
PRODUCER Arthur J. Gallagher Risk Management Services, Inc. 1201 Walnut Street, Suite 1400 Kansas City, MO 64106						<sup>ст</sup> Магу Ga	lvan					
						PHONE						
						E-MAIL ADDRESS: mary_galvan@ajg.com						
						INSURER(S) AFFORDING COVERAGE					NAIC#	
						INSURER A : Depositors Insurance Company					42587	
INSURED Pilgrim Center Inc.						INSURER B:						
						INSURER C :						
Roger Coleman Post Office Box 32383 Kansas City, MO 64171					INSURER D:							
					INSURER E :							
						INSURER F:						
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:						
II C	HIS IS TO CERTIFY THAT THE POLICI NDICATED. NOTWITHSTANDING ANY F PERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	REQUI PER	REMITAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFOR	N OF A	NY CONTRAC	CT OR OTHER	R DOCUMENT WI ED HEREIN IS S	TH RESPE	CT TO	WHICH THIS	
INSR TYPE OF INSURANCE			SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
Α	X COMMERCIAL GENERAL LIABILITY					,		EACH OCCURRENCE \$		\$	1,000,000	
	CLAIMS-MADE X OCCUR			ACP7163581063		08/15/2014	08/15/2015	DAMAGE TO REN PREMISES (Ea occ	rED currence)	\$	100,000	
							a .	MED EXP (Any one		\$	5,000	
								PERSONAL & ADV	INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGRE	GATE	\$	2,000,000	
	POLICY PRO- JECT LOC							PRODUCTS - COM	P/OP AGG	\$	2,000,000	
	OTHER:									\$		
	AUTOMOBILE LIABILITY					economy constitution of the economic and		COMBINED SINGL (Ea accident)	E LIMIT	\$	e and and a second to the second seco	
	ANY AUTO							BODILY INJURY (F	er person)	\$		
	ALL OWNED SCHEDULED AUTOS							BODILY INJURY (F		\$		
	HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMA (Per accident)	GE	\$		
										\$		
	UMBRELLA LIAB OCCUR			*				EACH OCCURREN	CE	\$		
	EXCESS LIAB CLAIMS-MADE					1		AGGREGATE		\$		
	DED RETENTION\$							PER	OTH-	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							STATUTE	ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDE	NT	\$		
	(Mandatory in NH) If yes, describe under				1			E.L. DISEASE - EA EMPLOYEE		\$		
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - PO	LICY LIMIT	\$		
					×			5				
Spe Add Can	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC cial Event (Pilgrim Run) to take place N litional Insured: The Citty of Kansas Ci cellation: Should any of the above des ling insurer will mail 10 days written no	ovem ty, Mis	ber 2 ssoui	7th, 2014 ri as their interest may app icies be cancelled before t	ear. he expi	ration date th		ed)				
CERTIFICATE HOLDER						CANCELLATION						
City of Kansas City, MO Vanessa Huskey 414 Wast 12th Street, 4th Floor West						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
	Kansas City, MO 64105	AUTHORIZED REPRESENTATIVE										

C. Trephen Metzler