

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/11/2008

| | | | |
|-----------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| PRODUCER MARSH USA INC. 1225 17TH STREET, SUITE 2100 DENVER, CO 80202-5534 | | THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. | |
| S56826-01245-ELL- | | INSURERS AFFORDING COVERAGE | NAIC # |
| INSURED ADAMS COUNTY SCHOOL DISTRICT #14 5291 E. 60TH AVENUE COMMERCE CITY, CO 80022 | | INSURER A: Princeton Excess & Surplus Lines Co. | |
| | | INSURER B: Safety National Casualty Corp. | 15105 |
| | | INSURER C: | |
| | | INSURER D: | |
| | | INSURER E: | |

2

COVERAGES

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 CERTIFICATE 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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR | ADD'L LTR | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|------|--------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------|--------------------------------------|--------------------------------------------------|
| A | | GENERAL LIABILITY | 64-A3-EX-0000027-02 | 07/01/08 | 07/01/09 | EACH OCCURRENCE \$ 5,000,000 |
| | | X COMMERCIAL GENERAL LIABILITY | | | | DAMAGE TO RENTED PREMISES(Ea occurrence) \$ |
| | | <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR | | | | MED EXP (Any one person) \$ EXCLUDED |
| | | <input type="checkbox"/> \$150,000 SIR | | | | PERSONAL & ADV INJURY \$ |
| | | GENERAL AGGREGATE LIMIT APPLIES PER: | | | | GENERAL AGGREGATE \$ 6,000,000 |
| | | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC | | | | PRODUCTS - COMP/OP AGG \$ 5,000,000 |
| A | | AUTOMOBILE LIABILITY | 64-A3-EX-0000027-02 | 07/01/08 | 07/01/09 | COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 |
| | | X ANY AUTO | | | | BODILY INJURY (Per person) \$ |
| | | ALL OWNED AUTOS | | | | BODILY INJURY (Per accident) \$ |
| | | SCHEDULED AUTOS | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | Hired AUTOS | | | | |
| | | NON-OWNED AUTOS | | | | |
| | | <input checked="" type="checkbox"/> \$150,000 SIR | | | | |
| | | GARAGE LIABILITY | | | | AUTO ONLY - EA ACCIDENT \$ |
| | | <input type="checkbox"/> ANY AUTO | | | | OTHER THAN EA ACC \$ |
| | | <input type="checkbox"/> | | | | AGG \$ |
| | | EXCESS/UMBRELLA LIABILITY | | | | EACH OCCURRENCE \$ |
| | | <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE | | | | AGGREGATE \$ |
| | | <input type="checkbox"/> DEDUCTIBLE | | | | \$ |
| | | <input type="checkbox"/> RETENTION \$ | | | | \$ |
| | | | | | | \$ |
| B | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | SP-2G62-CO EXCESS WORKERS' COMP. \$350,000 RETENTION | 07/01/08 | 07/01/09 | WC STATUTORY LIMITS X OTH-ER |
| | | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | | | | E.L. EACH ACCIDENT \$ 1,000,000 |
| | | If yes, describe under SPECIAL PROVISIONS below | | | | E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 |
| | | | | | | E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |
| A | OTHER EDUCATORS LEGAL LIABILITY (CLAIMS MADE) | 64-A3-EX-0000027-02 | | 07/01/08 | 07/01/09 | \$5,000,000 EACH CLAIM \$5,000,000 AGGREGATE |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
FOR INFORMATION PURPOSES ONLY

| | |
|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CERTIFICATE HOLDER SEA-001280618-01 | CANCELLATION |
| EVIDENCE OF INSURANCE ADAMS COUNTY SCHOOL DISTRICT 14 5291 E. 60th Ave. COMMERCE CITY, CO 80022 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. |
| | AUTHORIZED REPRESENTATIVE of Marsh USA Inc. Sharon A. Hammer |

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.