ACORD™ CERTIFICATE OF LIABILITY INSURANCE  Date (MM/DD/Y)							
Insurance Provider 100 Insurance Lane Saint Paul, MN 55100			ONLY A	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OF ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.  INSURERS AFFORDING COVERAGE			
INSURED							
Organization			INSURER A: I	INSURER A: Insurance Co. ABC			
0			INSURER B: INSURER C:	NSURER B: NSURER C:			
Saint Paul, MN 55100				numer o			
			INSURER D:		Minimum of \$1,000,000 per		
			INSURER E:			occurrence and \$1,000,000	
COVERAGES					aggregate		
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATEL NOTWITHS TANDING 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.							
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMI	TS	
GENE	RAL		01/01/20	12/31/20		s 1,000,000	
	COMMERCIAL GENERAL LIABILITY		01/01/20	12/31/20	DAMAGE TO RENTED PREMISES (each occurrence)	\$	
A	CLAIMS MADE X OCCUR				MED EXP (Any one person)	\$	
						\$ 1,000,000	
GENT	AGGREGATE LIMIT APPLIES PER:			\		\$1,000,000 \$	
<del></del>	MOBILE LIABILITY				COMPINED SINGLE LIMIT		
	ANY AUTO				(each accident)	\$	
	ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$	
A	HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$	
<u> </u>					PROPERTY DAMAGE (per accident)	\$	
GARA	GE LIABILITY				L L	\$	
	ANY AUTO				OTHER THAN <u>EA ACC</u> AUTO ONLY: <u>AGG</u>	\$ \$	
					EACH ACCIDENT	\$	
					E LOUI OCCUPATION	\$	
1 . <del></del>	SS LIABILITY					\$	
A	OCCUR CLAIMS MADE				AGGREGATE	\$	
	DEDUCTIBLE    RETENTION \$ RKERS COMPENSATION AND				WC STATU- OTH-	\$	
	PLOYERS' LIABILITY				X TORY LIMITS ER		
A THE	PROPRIETOR/ INCL.				E.L. EACH ACCIDENT	\$	
PAR'	PROPRIETOR/ TNERS/EXECUTIVE ICERS ARE INCL EXCL				E.L. DISEASE - EA EMPLOYEE E.L. DISEASE – POLICY LIMIT	\$ ¢	
OTH			Include additional indemnification language E.L. DISEASE – POLICY LIMIT			3	
		-		99			
DESCRIPTION OF OPERATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS							
To the extent possible, the City of Saint Paul shall be an Additional Insured as per the contractual agreement with the Named Insured.							
CERTIFICATE HOLDER				CANCELLATION			
The City of Saint Paul Cultural STAR Program			Should any	Should any of the above described policies be canceled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.			
25 West 4 <sup>th</sup> Street, 14 <sup>th</sup> Floor Saint Paul, MN 55102			AUTHORIZED R	EPRESENTATIVE			