

EVANSTON INSURANCE COMPANY
 CERTIFICATE NO.: -

**CERTIFICATE OF INSURANCE
 EXCLUDES COVERAGE FOR NOMINEE EVENTS
 SEE SEPARATE APPLICATION FOR NOMINEE EVENTS
 SPECIAL EVENT LIABILITY PROGRAM**

PRODUCER: Alliant Insurance Services, Inc. P. O. Box 28323 Santa Ana, CA 92799-8323 (949) 660-8163 License No: OC 36861	PUBLIC ENTITY (ADDITIONAL INSURED) 	
NAMED INSURED (EVENT HOLDER): 	EVENT INFORMATION: Description of Event: _____ DATE(S): _____ LOCATION: _____ *Liquor Liability Yes <input type="checkbox"/> No <input type="checkbox"/> **Liquor Liability after 12 am ends before 2 am <input type="checkbox"/>	
<p>This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirements, terms or conditions of any contract or other document with respect to which this certificate may be issued, any 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.</p> <p>INSURANCE CARRIER: Evanston Insurance Company</p> <p>MASTER POLICY NUMBER: 04SEP1000001</p> <p>MASTER POLICY DATES: EFFECTIVE: JANUARY 1, 2009 EXPIRATION: JANUARY 1, 2010</p>		
COMMERCIAL GENERAL LIABILITY General Aggregate Limit \$ 2,000,000 Products & Completed Operations 1,000,000 Personal & Advertising Injury 1,000,000 Each Occurrence Limit 1,000,000 Fire Damage (Any One Fire) 50,000 Medical Payments (Any One Person) 5,000 Liquor Liability (If purchased) 1,000,000	OCURRENCE FORM 	DEDUCTIBLE: NONE
The limits of insurance apply separately to each event insured by this policy as if a separate policy of insurance has been issued for that event.		
"Who is insured" is amended to include the insured, the person or organization shown in this schedule, but only with respect to liability arising out of the ownership, maintenance or use of premises used by the named insured (event holder). This insurance does not apply to: Any "occurrence" which takes place after the event holder ceases to be a tenant in that premises.		
OTHER ADDITIONAL INSUREDS		
CANCELLATION: Should the above described policy be cancelled before the expiration date thereof, the issuing company will mail 30 days written notice to the Certificate Holder and Additional Insured's listed.		

AUTHORIZED REPRESENTATIVE: _____ *Karl F. Swales* _____
DATE ISSUED: _____ (Enter the date you issued this Certificate) _____