Client#: 178738

PREFECARRI

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

5/28/2015

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).

certificate holder in lieu	of such endorsement(s).		
PRODUCER Marsh & McLennan Agency LLC 2725 South Moorland Road New Berlin, WI 53151 800 242-7001		CONTACT Shelley Paquin PHONE (A/C, No, Ext): 262-796-8802 E-MAIL ADDRESS: spaquin@securityins.net	_{p):} 262-785-9753
		INSURER(S) AFFORDING COVERAGE INSURER A : Acuity Insurance	NAIC #
Preferred Carrier Logis 6930 S. 6th St. Oak Creek, WI 53154	or Logistica LLC	INSURER B : Travelers	999999
	3	INSURER C :	
		INSURER D :	
		INSURER E :	
		INSURER F :	
COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:	

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS ADDL SUBR INSR WVD POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER LIMITS A GENERAL LIABILITY X17333 06/01/2015 06/01/2016 EACH OCCURRENCE s 1,000,000 X. COMMERCIAL GENERAL LIABIL.TY DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) 35.000 PERSONAL & ADV INJURY s 1,000,000 GENERAL AGGREGATE \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP OP AGG s2,000,000 POLICY PRO-3 06/01/2015 06/01/2016 COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY X17333 s1,000,000 X ANY AUTO BODILY INJURY (Per person) SCHEDULED AUTOS NCN-OWNED ALL OWNED AUTOS BODILY INJURY (Per accident) 3 PROPERTY DAMAGE SCTUA CERIH X (Per accident) 3 X UMBRELLA LIAB X cocup X17333 06/01/2015 06/01/2016 EACH DESURRENCE \$1,000,000 EXCESS LIAB CLAIMS-MAZE AGGREGATE \$1,000,000 DED X RETENTION 30 WORKERS COMPENSATION 06/01/2015 06/01/2016 x WC STATU-X17333 AND EMPLOYERS' LIABILITY ANY PROPRIETOR PARTNER, EXECUTIVE EIL EACH ACCIDENT 3100,000 NNA (Mandatory in NH) E L. DISEASE - EA EMPLOYEE 3100,000 If yes, describe under DESCRIPTION OF OPERATIONS below EL DISEASE - POLICY LIMIT | 3500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

QT6609509L62ATIL

CERTIFICATE HOLDER	CANCELLATION	
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
	AUTHORIZED REPRESENTATIVE	
	Sixt Nose	
	2 1002 0010 10072 00072	

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\$250,000 Refer Limit

\$5.000 Ded.

06/01/2015 06/01/2016 \$250,000 Liab Limit

Motor Truck Cargo