DATE (MM/DD/YY)



CERTIFICATE OF LIABILITY INSURANCE

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)

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PRODUCER	CONTACT NAME:	
McGriff, Seibels & Williams of Oregon 1800 SW First Avenue, Suite 400 Portland, OR 97201	PHONE (A/C, No, Ext): 503 943-6621 FAX (A/C, No): 50	3 943-6622
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: ACE American Insurance Company	22667
ABF Freight System, Inc. 3801 Old Greenwood Road Fort Smith, AR 72903	INSURER B: Aspen American Insurance Company	43460
	INSURER C: Westchester Fire Insurance Company	10030
	INSURER D: ACE Property and Casualty Insurance Company	20699
	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 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 SLICE POLICIES LIMITS SHOWN MAY HAVE REEN PEDILICED BY PAID CLAIMS

	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
INS LTF	R TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			XSL G27871173	11/01/2017	11/01/2018	EACH OCCURRENCE \$ 4,000,000	
	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 0	
	X Excess of SIR						PERSONAL & ADV INJURY \$ 4,000,000	
							GENERAL AGGREGATE \$ 4,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG \$ 4,000,000	
Α	AUTOMOBILE LIABILITY			XSA H09063316	11/1/2017	11/1/2018	COMBINED SINGLE LIMIT \$ 4,000,000	
	X ANY AUTO						BODILY INJURY (Per person) \$	
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident) \$	
	X HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident) \$	
					Ť		\$	
C	UMBRELLA LIAB X OCCUR			G46830921001(XS Auto)	11/1/2017	11/1/2018	EACH OCCURRENCE \$ 1,000,000	
D	X EXCESS LIAB CLAIMS-MADE			XOO G28179704 002			AGGREGATE \$ 1,000,000	
	DED RETENTION \$						\$	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			WLR C64618799	11/01/2017	11/01/2018	X WC STATU- TORY LIMITS OTH- ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A		WCU C64618817	11/01/2017	11/01/2018	E.L. EACH ACCIDENT \$ 1,000,000	
	(Mandatory in NH) If yes, describe under			(Excess, Statutory Limit)			E.L. DISEASE - EA S 1,000,000	
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$ 1,000,000	
В	Cargo			OCAGATC17	05/01/2017	11/01/2018	Limit \$ 2,000,000	

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

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