



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
7/7/2016

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER Arthur J. Gallagher Risk Management Services, Inc. Two Pierce Place, 22nd Floor Itasca IL 60143	CONTACT NAME: Gallagher Bassett Services, INC. PHONE (A/C, No, Ext): 414/203-4053 FAX (A/C, No): 414/258-1250 E-MAIL ADDRESS: PRODUCER CUSTOMER ID: DIOCOFR-01														
INSURED Diocese of Rockford Finance & Administration Office P.O. Box 7044 Rockford IL 61125	<table border="1"><thead><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A: Church Mutual Insurance Company</td><td>18767</td></tr><tr><td>INSURER B: Federal Insurance Company</td><td>20281</td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></tbody></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Church Mutual Insurance Company	18767	INSURER B: Federal Insurance Company	20281	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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COVERAGES**CERTIFICATE NUMBER:** 1577268607**REVISION NUMBER:****LOCATION OF PREMISES / DESCRIPTION OF PROPERTY** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

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 SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS		
A	<input type="checkbox"/>	PROPERTY	050014413902379	7/1/2016	7/1/2017	<input type="checkbox"/>	BUILDING	\$	
	CAUSES OF LOSS					DEDUCTIBLES	<input type="checkbox"/>	PERSONAL PROPERTY	\$
	<input type="checkbox"/>	BASIC				BUILDING	<input type="checkbox"/>	BUSINESS INCOME	\$
	X	BROAD				CONTENTS	<input type="checkbox"/>	EXTRA EXPENSE	\$
	<input type="checkbox"/>	SPECIAL					<input type="checkbox"/>	RENTAL VALUE	\$
	<input type="checkbox"/>	EARTHQUAKE				<input type="checkbox"/>	BLANKET BUILDING	\$	
	<input type="checkbox"/>	WIND				<input type="checkbox"/>	BLANKET PERS PROP	\$	
	<input type="checkbox"/>	FLOOD				<input type="checkbox"/>	X	BLANKET BLDG & PP	\$1,000,000
	X	Fire				Included	<input type="checkbox"/>		\$
	X	Theft				Included	<input type="checkbox"/>		\$
	<input type="checkbox"/>	INLAND MARINE	TYPE OF POLICY			<input type="checkbox"/>		\$	
	CAUSES OF LOSS		<input type="checkbox"/>				\$		
	<input type="checkbox"/>	NAMED PERILS	POLICY NUMBER			<input type="checkbox"/>		\$	
	<input type="checkbox"/>					<input type="checkbox"/>		\$	
B	<input type="checkbox"/>	CRIME	82222705	7/1/2016	7/1/2017	X	Limit	\$1,000,000	
	TYPE OF POLICY					X	Deductible	\$50,000	
	Employee Dishonesty					<input type="checkbox"/>		\$	
	<input type="checkbox"/>	BOILER & MACHINERY / EQUIPMENT BREAKDOWN				<input type="checkbox"/>		\$	
	<input type="checkbox"/>					<input type="checkbox"/>		\$	
						<input type="checkbox"/>		\$	
						<input type="checkbox"/>		\$	

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

For: Our Lady of Good Counsel, 620 S. Fifth Street, Aurora, IL 60505. For parish festival to be held on September 25, 2016 at 620 S. Fifth Street, Aurora, IL.
See Attached...

CERTIFICATE HOLDER**CANCELLATION**

City of Aurora
44 East Downer Place
Aurora IL 60507

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

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AGENCY CUSTOMER ID: DIOCOFR-01

LOC #: _____

ADDITIONAL REMARKS SCHEDULEPage 1 of 1

AGENCY Arthur J. Gallagher Risk Management Services, Inc.		NAMED INSURED Diocese of Rockford Finance & Administration Office P.O. Box 7044 Rockford IL 61125	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** 24 **FORM TITLE:** CERTIFICATE OF PROPERTY INSURANCE

Special Conditions

The premises shall be restored to the same condition as the premises existed prior to the operation of the music festival including, but not limited to, removal of all facilities and equipment related to the music festival, or any part thereof, trash, garbage and miscellaneous debris.

The City of Aurora is listed as an additional insured with respect to this certificate.