

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/19/2017

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 have ADDITIONAL INSURED provisions or 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).

this certificate does not come rights to the certificate noticer in neu of such endorsement(s).						
PRODUCER		CONTACT NAME: Barry Gordy				
Commercial Lines – 800-868-8834		PHONE (A/C, No, Ext): 704-555-6349 FAX (A/C, No): 866-3	32-3051			
Wells Fargo Insurance Services LISA Inc		E-MAIL ADDRESS: BGordy@wellspring.com				
6100 Fairview Road		INSURER(S) AFFORDING COVERAGE	NAIC#			
Charlotte, NC 28210		INSURER A: North River Insurance Company	21105			
INSURED		INSURER B: American Compensation Ins Co	46934			
Queen of Soul Enterprises	Name of the	INSURER C:				
1 A. Franklin St.	Insured and	INSURER D:				
Detroit MI, USA		INSURER E :				
	address	INSURER F:				

COVERAGES CERTIFICATE NUMBER: 12359066 REVISION NUMBER: See below

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 REDUICED BY PAID CLAIMS.

E	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDITIONS POLICY EFF. POLI						
INSR LTR	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	Coverage	
А	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	THOS TIVE	5068916703	10/31/17	10/31/18	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 100,000
				Effectiv	I	MED EXP (Any one person) PERSONAL & ADV INJURY	\$ 5,000 \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:		General Liability	Expirat	ion	GENERAL AGGREGATE	\$ 2,000,000
	POLICY PROJECT X LOC			Dates		PRODUCTS - COMP/OP AGG	\$ 1,000,000
А	AUTOMOBILE LIABILITY		5068916703	10/31/17	10/31/18	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000 _
	X ANY AUTO					BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	X HIRED X NON-OWNED AUTOS ONLY		Automobile Liability			PROPERTY DAMAGE (Per accident)	\$
							\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
	DED RETENTION\$						\$
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		ACNC0002173	10/31/17	10/31/18	X PER STATUTE ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	Workers	<u> </u>		E.L. EACH ACCIDENT	\$ 500,000
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	DESCRIPTION OF OPERATIONS below		Compensation			E.L. DISEASE - POLICY LIMIT	\$ 500,000

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

Certificate holder is named as additional insured as it relates to general liability in accordance with the terms and conditions of the policy.

List The Charlotte-Mecklenburg Board of Education as The Additional Insured under General Liability

CERTIFICATE HOLDER	CANCELLATION

The Charlotte Mecklenburg Board of Education
P O Box 30035

Charlotte NC 28230-0035

This is the correct address

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

geare Brandon

The ACORD name and logo are registered marks of ACORD © 1988-2015 ACORD CORPORATION. All rights reserved.