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CORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/9/2016

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.

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 en	dorsement(s).						
PRODUCER Midwest Insurance Agency, Inc. 975 W Hawthorn Drive Itasca, IL 60143		(630) 472-2300	CONTACT Certificate Requests should be faxed or e-mailed					
			PHONE (A/C, No, E	NE, Ext): 630-472-2300 FAX (A/C, No): 630-		72-2385		
			E-MAIL ADDRESS: certs@midwestinsure.com					
				INSURER(S) AFFORDING COVERAGE	NAIC #			
				SURER A: The Burlington Insurance, Co.				
INSURED	Mid Logistics, Inc.		INSURER B : Spirit Commercial Auto Risk Retention Group					
	2210 Midwest Rd		INSURER C: Zurich American Insurance			16535		
	Unit 105		INSURER D: Travelers Property Casualty Co of America			25674		
	Oak Brook, IL 60523		INSURER E	i:				
			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 SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	NSR TR TYPE OF INSURANCE		SUBR WVD	POLICY EFF POLICY EXP (MM/DD/YYYY) LIN		LIMIT	s		
	GENERAL LIABILITY				,		EACH OCCURRENCE	\$	1,000,000
Α	X COMMERCIAL GENERAL LIABILITY			254B101731	6/8/2016	6/8/2017	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
	CLAIMS-MADE OCCUR						MED EXP (Any one person)	\$	5,000
							PERSONAL & ADV INJURY	\$	1,000,000
							GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	2,000,000
	POLICY PRO- JECT LOC							\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
В	ANY AUTO			CAC000010519716	5/25/2016	5/25/2017	BODILY INJURY (Per person)	\$	
	ALL OWNED X SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$	
								\$	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION \$							\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						WC STATU- OTH- TORY LIMITS ER		
С			N/A	WC0232406	2/1/2016	2/1/2017	E.L. EACH ACCIDENT	\$	\$100,000
							E.L. DISEASE - EA EMPLOYEE	\$	\$100,000
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	\$500,000
D	D Motor Truck Cargo			QT6608072X616TIL16	5/25/2016	5/25/2017	Single Conveyance		\$250,000
D	D Motor Truck Cargo			QT6608072X616TIL16	5/25/2016	5/25/2017	Deductible		\$2,500

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

Proof of Coverage

CERTIFICATE HOLDER	CANCELLATION				
Proof of Coverage	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				