ACORD, CERTIFICATE OF LIABILITY INSURANCE							DATE (MM/DD/YYYY)	
PRODUCER FAX				THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
				INSURERS AF	INSURERS AFFORDING COVERAGE			
INSURED				INSURER A:				
				INSURER B:				
				INSURER C:				
				INSURER D:	INSURER D:			
				INSURER E:	INSURER E:			
CO	/ERA	AGES						
A! M	NY R	OLICIES OF INSURANCE LISTED B EQUIREMENT, TERM OR CONDITI ERTAIN, THE INSURANCE AFFORI IES. AGGREGATE LIMITS SHOWN	ON OF ANY CONTRACT OR OTH DED BY THE POLICIES DESCRIB	ER DOCUMENT V				
INSR LTR	ADD'L INSRI	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	rs	
		GENERAL LIABILITY				EACH OCCURRENCE	\$	
		COMMERCIAL GENERAL LIABILITY			[DAMAGE TO RENTED PREMISES (Fa occurence)	\$	
		CLAIMS MADE OCCUR				MED EXP (Any one person)	\$	
Α						PERSONAL & ADV INJURY	\$	
						GENERAL AGGREGATE	\$	
		GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC				PRODUCTS - COMP/OP AGG	S	
		ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	s	
		ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	s	
		HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	s	
						PROPERTY DAMAGE (Per accident)	s	
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
		ANY AUTO				OTHER THAN EA ACC	s	
					1:	AUTO ONLY: AGG	Total Control	
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$	
		OCCUR CLAIMS MADE				AGGREGATE	\$	
		DEDUCTIBLE					s	
		RETENTION \$					s	
	WOR	RKERS COMPENSATION AND				WC STATU- TORY LIMITS ER		
	EMP	LOYERS' LIABILITY				E.L. EACH ACCIDENT	s	
		PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE	\$	
	If yes	, describe under CIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$	
	ОТН	ER						
		AN OF OREN TRAVALLE AND THE COLUMN	E0 (EVOLUCIONA A DE EE D. (E.)	WT (0 D T)				
DESC	KIPTI	F&MWR Enterprise	Fund is listed as Additi					
15000	e jednosta e	0/3742-14/3746/44/374000		: <u>0</u> 13640;:0000;0000	30.898		্যা	
CEF	RTIFIC	CATE HOLDER			CANCELLATION			
GMWROE at Fort Carson, CO					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE			
· ·					EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,			
1675 Ellis Street, Bldg. 1217				45 35110 HERVES	BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY			
Fort Carson, CO 80913				Transfer And Squarest Specific	OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.			
				-	AUTHORIZED REPRESENTATIVE			