

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
1/2/09

PRODUCER

FOR SERVICE CALL:

FRANCIS L. DEAN & ASSOCIATES, INC.
1776 S. NAPERVILLE RD., BLDG. B
P.O. BOX 4200
WHEATON, IL 60189
(800) 745-2409
www.fdean.com

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.

COMPANIES AFFORDING COVERAGE

COMPANY
A STARR INDEMNITY & LIABILITY COMPANY

COMPANY
B

COMPANY
C

COMPANY
D

INSURED SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND ITS PARTICIPATING MEMBERS:

The Fusion Exchange
1231 NE Martin Luther King Jr. Boulevard #602
Portland, OR 97232 CERT. #P2GL-100010-01

COVERAGES

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	P2GL-100000-01	1/9/2009	1/12/2009	GENERAL AGGREGATE	\$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG	\$ 1,000,000.00
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,000,000.00
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS				FIRE DAMAGE (Any one fire)	\$ 300,000.00
					MED EXP (Any one person)	\$ N/A
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY-EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	\$
					AGGREGATE	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM					\$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	
	<input type="checkbox"/> INCL				EL EACH ACCIDENT	\$
	<input type="checkbox"/> EXCL				EL DISEASE - POLICY LIMIT	\$
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				EL DISEASE - EA EMPLOYEE	\$
	OTHER					
	Total Certificate Premium:					\$380.00

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Dance Event

CERTIFICATE HOLDER

The Fusion Exchange
1231 NE Martin Luther King Jr. Boulevard #602
Portland, OR 97232

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL **30** DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Francis L. Dean

ADDITIONAL INSURED

Date (MM/DD/YY)
1/2/09

AGENCY	PHONE (A/C, No, Ext): 800-745-2409 FAX (A/C, No.): 630-665-7294	APPLICANT (First Named Insured)	Phone (A/C, No, Ext):
FRANCIS L. DEAN & ASSOCIATES, INC. 1776 S. NAPERVILLE RD., BLDG. B P.O. BOX 4200 WHEATON, IL 60187		The Fusion Exchange 1231 NE Martin Luther King Jr. Boulevard #602 Portland, OR 97232	
EFFECTIVE DATE 1/9/2009		EXPIRATION DATE 1/12/2009	
CO/PLAN			
CODE: SUBCODE:		POLICY NUMBER: P2GL-100000-01	
AGENCY CUSTOMER ID		ACCOUNT NUMBER:	

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER		
<input checked="" type="checkbox"/>	ADDITIONAL INSURED	The Scottish Rite Center 709 SW 15 th Avenue Portland, OR 97232			LOCATION:	BUILDING:	
<input type="checkbox"/>	LOSS PAYEE				VEHICLE:	BOAT:	
<input type="checkbox"/>	MORTGAGE				SCHEDULED ITEM NUMBER:		
<input type="checkbox"/>	LIENHOLDER				OTHER		
<input type="checkbox"/>	EMPLOYEE AS LESSOR				ITEM DESCRIPTION:		
<input type="checkbox"/>							
<input checked="" type="checkbox"/>	ADDITIONAL INSURED				LOCATION:	BUILDING:	
<input type="checkbox"/>	LOSS PAYEE				VEHICLE:	BOAT:	
<input type="checkbox"/>	MORTGAGE				SCHEDULED ITEM NUMBER:		
<input type="checkbox"/>	LIENHOLDER				OTHER		
<input type="checkbox"/>	EMPLOYEE AS LESSOR				ITEM DESCRIPTION:		
<input type="checkbox"/>							
<input checked="" type="checkbox"/>	ADDITIONAL INSURED				LOCATION:	BUILDING:	
<input type="checkbox"/>	LOSS PAYEE				VEHICLE:	BOAT:	
<input type="checkbox"/>	MORTGAGE				SCHEDULED ITEM NUMBER:		
<input type="checkbox"/>	LIENHOLDER				OTHER		
<input type="checkbox"/>	EMPLOYEE AS LESSOR				ITEM DESCRIPTION:		
<input type="checkbox"/>							
<input checked="" type="checkbox"/>	ADDITIONAL INSURED				LOCATION:	BUILDING:	
<input type="checkbox"/>	LOSS PAYEE				VEHICLE:	BOAT:	
<input type="checkbox"/>	MORTGAGE				SCHEDULED ITEM NUMBER:		
<input type="checkbox"/>	LIENHOLDER				OTHER		
<input type="checkbox"/>	EMPLOYEE AS LESSOR				ITEM DESCRIPTION:		
<input type="checkbox"/>							
<input checked="" type="checkbox"/>	ADDITIONAL INSURED				LOCATION:	BUILDING:	
<input type="checkbox"/>	LOSS PAYEE				VEHICLE:	BOAT:	
<input type="checkbox"/>	MORTGAGE				SCHEDULED ITEM NUMBER:		
<input type="checkbox"/>	LIENHOLDER				OTHER		
<input type="checkbox"/>	EMPLOYEE AS LESSOR				ITEM DESCRIPTION:		
<input type="checkbox"/>							
<input checked="" type="checkbox"/>	ADDITIONAL INSURED				LOCATION:	BUILDING:	
<input type="checkbox"/>	LOSS PAYEE				VEHICLE:	BOAT:	
<input type="checkbox"/>	MORTGAGE				SCHEDULED ITEM NUMBER:		
<input type="checkbox"/>	LIENHOLDER				OTHER		
<input type="checkbox"/>	EMPLOYEE AS LESSOR				ITEM DESCRIPTION:		
<input type="checkbox"/>							