

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/12/2018

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 po certificate holder in lieu of such endorsement(s).	licies may require an en	idorsement. A stat	ement on this	s certificate does not co	onfer ri	ghts to the
PRODUCER		CONTACT NAME: Lockton Affinity, LLC				
FRODUCEN				1		
Lockton Affinity, LLC		PHONE   FAX   (A/C, No, Ext): 800-496-0288   FAX   (A/C, No): 913-652-7599   E-MAIL				
P. O. Box 879610		ADDRESS:				
Kansas City, MO 64187-9610		INSURER(S) AFFORDING COVERAGE				NAIC#
INSURED		INSURER A:				
Arizona Knights of Columbus Charity, Inc.		INSURER B:				
		INSURER C:				
14175 W Indian School Rd, Suite B4-626		INSURER D:				
Goodyear, AZ 85395-8369		INSURER E:				
		INSURER F:				
COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:						IOV DEDICE
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. L	IMITS SHOWN MAY HAVE					
INSR ADDL SUBR LTR TYPE OF INSURANCE INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	3	
COMMERCIAL GENERAL LIABILITY Y				EACH OCCURRENCE	\$	
CLAIMS-MADE OCCUR				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
				•	\$	
				` ' ' ' '	\$	
GEN'L AGGREGATE LIMIT APPLIES PER:					\$	
POLICY PRO- JECT LOC					\$	
OTHER:					\$	
AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	
				(Ea accident)	\$	
ANY AUTO ALL OWNED SCHEDULED			-	( ' ' '	\$	
AUTOS AUTOS NON-OWNED			-	PROPERTY DAMAGE	\$	
HIRED AUTOS AUTOS			-	(Per accident)	\$	
UMBRELLA LIAB CCCUP					-	
					\$	
EXCESS LIAB   CLAIMS-MADE					\$	
DED RETENTION \$ WORKERS COMPENSATION				PER OTH-	\$	
AND EMPLOYERS' LIABILITY Y/N				STATUTE ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE N/A				E.L. EACH ACCIDENT	\$	
(Mandatory in NH)  If yes, describe under				E.L. DISEASE - EA EMPLOYEE	\$	
DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT	\$	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)						
RE: Arizona Knights of Columbus Charity, Inc. to hold the Persons with Intellectual Disabilities Drive to be held throught Arizona during the weekend September 28 - 30, 2018.						
Fry's Grocery Stores is an Additional Insured, where required by written contract, per the terms, conditions and exclusions of the referenced general liability policy.						
5110 1515151150 gono141 114211157 F61157.						
CERTIFICATE HOLDER CANCELLATION						
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Frys Grocery Stores						
			-			
	ľ	AUTHORIZED REPRESE	NTATIVE			
Phoenix, AZ		Path D. Otames				
-	1 1011.010-000					

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