

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/11/2018

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 If SUBROGATION IS WAIVED, subject to the terms and conditions this certificate does not confer rights to the certificate holder in lie.	s of the polic	cy, certain po	olicies may i				
PRODUCER	CONTA		, -				
Your Agent or Broker		NAME: PHONE					
Address	ADDRE						
City, State, Zip		INSURER(S) AFFORDING COVERAGE					NAIC#
INSURED		INSURER A:					
Your Company Name		INSURER B: INSURER C:					
Address		INSURER D:					
		INSURER E:					
City,State,Zip	INSURE	INSURER F:					
COVERAGES CERTIFICATE NUMBER: 1328	9623	REVISION NUMBER: See below					
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELC INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDICERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AF EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY INST. INST. TYPE OF INSURANCE ADDITIONS POLICY NUM	OITION OF AN FFORDED BY HAVE BEEN F	Y CONTRACT THE POLICIES REDUCED BY F	OR OTHER I	DOCUMENT WITH I	RESPEC	OT TO V	WHICH THIS
X COMMERCIAL GENERAL LIABILITY Your Policy No.		1/1/2019	1/1/2020	EACH OCCURRENCE		\$	1,000,000
CLAIMS-MADE X OCCUR		17 172019	17 172020	DAMAGE TO RENTED		\$	100,000
				MED EXP (Any one per	,,,,	\$	
				PERSONAL & ADV INJ	-	\$	1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGA		\$	2,000,000
X POLICY PRO- LOC ADECIMENTONIA				PRODUCTS - COMP/C		\$	1,000,000
OTHER:	(THOUSE COMM		\$,,,,,,,,
AUTOMOBILE LIABILITY				COMBINED SINGLE LI	IMIT	\$	
ANY AUTO				(Ea accident) BODILY INJURY (Per p	person)	\$	
OWNED SCHEDULED				BODILY INJURY (Per a		\$	
AUTOS ONLY AUTOS NON-OWNED				PROPERTY DAMAGE		\$	
AUTOS ONLY AUTOS ONLY				(Per accident)		\$	
UMBRELLA LIAB OCCUP				EACH OCCURRENCE		\$	
UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE				AGGREGATE		\$	
				AGGREGATE		\$	
DED RETENTION\$ WORKERS COMPENSATION				PER STATUTE	OTH- ER	a	
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT		\$	
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)				E.L. DISEASE - EA EM			
If yes, describe under				E.L. DISEASE - POLIC			
DÉSCRIPTION OF OPERATIONS below				E.L. DISEASE - POLIC	1 LIIVIII	\$	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks	Schedule, may b	e attached if more	space is require	ed)			
With respect to the Northwest Sportshow 3/19/2019 to 3/25/2019 (including	ng move-in/m	ove-out), NMN	MA, Northwes	st Sportshow, and	Minnea	polis Co	onvention
Center are included as additional insureds.	· ·	,	·	•			
CERTIFICATE HOLDER	CANO	CELLATION					
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.					
Progressive Insurance Northwest Sportshow c/o NMMA 231 S. La Salle St., Ste. 2050							
Chicago, IL 60604		AUTHORIZED REPRESENTATIVE					
-				R. 1			
		Jean Browlin					

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