



PEORIA POLICE DEPARTMENT



October 7, 2014

The Honorable James E. Ardis III  
Local Liquor Commissioner  
City of Peoria, Illinois

RE: Temporary Liquor License Application  
St. Jude Runners Association  
Landmark Recreation Center, 3225 N. Dries Lane  
Class H (outdoor)

Dear Mr. Ardis,

Enclosed is an application from St. Jude Runners Association for a Class H (outdoor) temporary liquor license. This license will be used on Sunday, November 9, 2014, between the hours of 11:00 a.m. and midnight. St. Jude Runners Association is hosting a tailgate party during the Chicago Bears and Green Bay Packers football game as a fundraiser. The game will be shown on a large screen in the parking lot of Landmark Recreation Center and St. Jude Runners Association will host a party in the parking lot. Alcoholic beverages and food will be served during the party. Security will be provided by off duty Peoria Police Officers.

Officer Scott Jordan conducted a background investigation on the officers listed in the application. Michael McCoy, 7405 Durham Lake Ct., Peoria, Illinois is the president of the organization. Ms. Liz Wilson, 23245 Farmdale Rd., Washington, Illinois, is the event chairman. St. Jude Runners Association is registered as a not for profit corporation in Illinois. Nothing was found that would prohibit approval of this request.

The Peoria Police Department has no objections to this license request.

Sincerely,

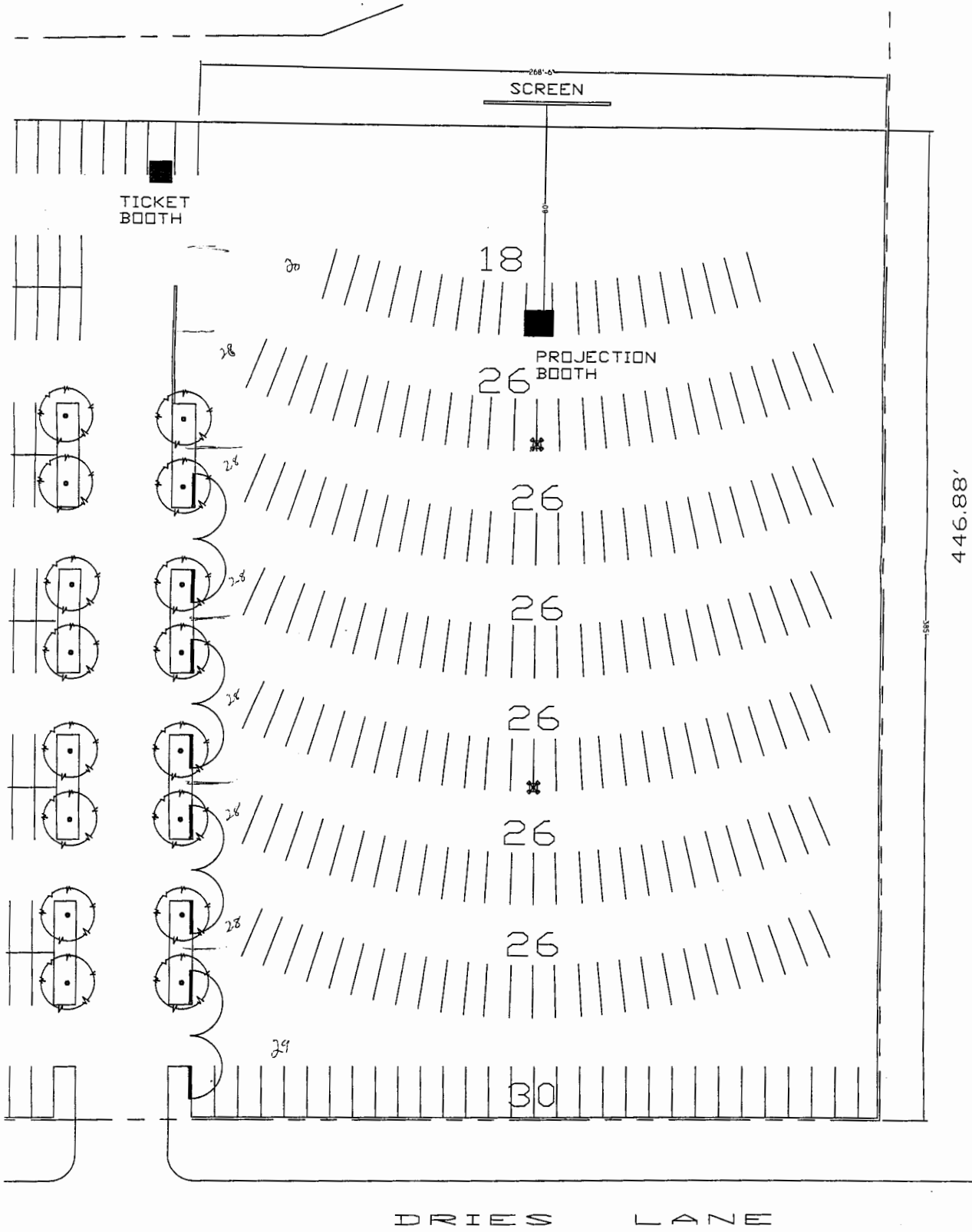
A handwritten signature in cursive script that reads "Jerry E. Mitchell".

Jerry E. Mitchell  
Chief of Police

JEM/sj

cc: Liquor Commissioner  
City Clerk  
Corporation Counsel

600 S. W. Adams Street  
Peoria, IL 61602-1592  
Phone 309.494.8300



446.88'

DRIES LANE



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/1/2014

**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 endorsement(s).**

<b>PRODUCER</b> Commercial Lines - (217) 398-4400 Wells Fargo Insurance Services USA, Inc. P.O. Box 4016 (61824-4016) Champaign, IL 61820-2071	<b>CONTACT NAME:</b> Kathleen Fuoss	
	<b>PHONE (A/C No. Ext.):</b> 217-398-4400	<b>FAX (A/C No.):</b> 877-302-2930
<b>E-MAIL ADDRESS:</b> kathleen.fuoss@wellsfargo.com		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A:</b> Cincinnati Specialty Underwriters Ins. Co.		13037
<b>INSURER B:</b>		
<b>INSURER C:</b>		
<b>INSURER D:</b>		
<b>INSURER E:</b>		
<b>INSURER F:</b>		

**COVERAGES**                      **CERTIFICATE NUMBER:** 8246257                      **REVISION NUMBER:** See below

**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	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO.JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below					PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Liquor Liability		CSU0056571	04/01/2014	04/01/2015	1,000,000 Aggregate Limit

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

RE: Tailgate St. Jude charity event on Sunday, Nov 9, 2014  
 Location: 3225 N Dries Lane, Peoria, IL 61604

Certificate holder is included as additional insured for the liability arising out of the operations of the named insured per written contract or agreement.

<b>CERTIFICATE HOLDER</b>  City of Peoria 419 Fulton Street Peoria, IL 61602	<b>CANCELLATION</b>  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 
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