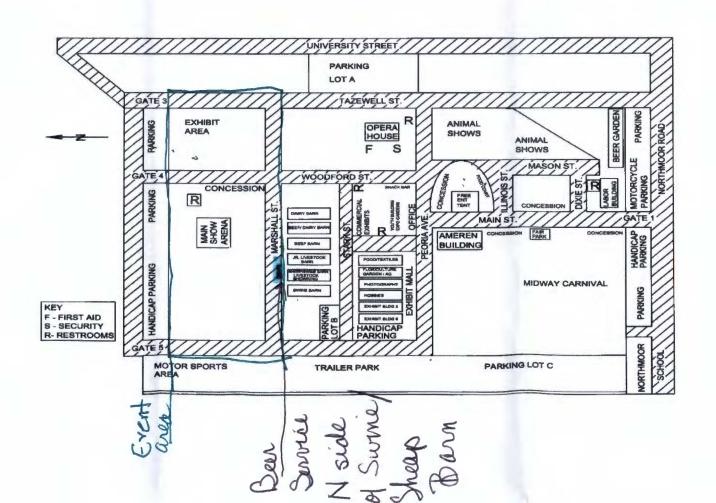


FAIRGROUNDS MAP EXPOSITION GARDENS, INC. 1601 W. NORTHMOOR ROAD PEORIA, IL 61614 309-691-6332

www.heartofillinoisfair.com

MAP For Oct 12,209 LAST BASH Devic



OP ID: HB

ACORD

## CERTIFICATE OF LIABILITY INSURANCE

09/06/2019

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 have ADDITIONAL INSURED provisions or 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 s PRODUCER 309-343-1149 Bullis & Sundberg LLC PO Box 830				CONTACT Cheri Hosteng				
				PHONE (A/C, No, Ext): 309-343-1149 FAX (A/C, No): 309-343			43-1405	
PO Box 830 Galesburg, IL 61402				E-MAIL ADDRESS: Cheri@bullisinsurance.com				
Cheri Hosteng  INSURED EXPOSITION Gardens, Inc PO BOX 3334 Peoria, IL 61612						DING COVERAGE		NAIC#
				INSURER A : Lloyd's of London				1000
				INSURER B:				
				INSURER C:				
				INSURER D:				
				INSURER E :				
				INSURER F:				
COV	ERAGES CER	TIFICAT	E NUMBER:	REVISION NUMBER:				
TH	IS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	PERTAIN	ENT, TERM OR CONDITION THE INSURANCE AFFOR	N OF ANY CONTRACT DED BY THE POLICIE	OR OTHER I	DOCUMENT WITH RESP D HEREIN IS SUBJECT	ECT TO	WHICH THIS
VSR TR		ADDL SUB		POLICY EFF (MM/DD/YYYY)		LIM	ITS	
IR	COMMERCIAL GENERAL LIABILITY	INSD WY		THE LOCAL THE	THE PARTY OF THE P	EACH OCCURRENCE	s	
	CLAIMS-MADE OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	s	
						MED EXP (Any one person)	\$	
						PERSONAL & ADV INJURY	s	
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	s	
	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGO	s s	
	OTHER:						s	
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO					BODILY INJURY (Per person	\$	
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accider	nt) \$	
	HIRED NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$	
	NOTOS SILE						\$	
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$	
	DED RETENTION \$					1	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	418				E.L. DISEASE - EA EMPLOY	EE \$	
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMI	T \$	
A	Liquor Liability		LIQ/218584.05	10/06/2019	10/06/2020	CSL		1,000,0
iau	ription of operations / Locations / vehic or Liability Event Address: 1601 nt: October 12th, 2019 9AM-11:59	W Nor	RD 181, Additional Remarks Schethmoor Rd., Peoria, IL	dule, may be attached if mo	re space la requi	red)		
CERTIFICATE HOLDER PEORI-1				CANCELLATION				
	City of Peoria		PEORI-1		N DATE TH	DESCRIBED POLICIES BE EREOF, NOTICE WILL CY PROVISIONS.		
419 Fulton Street, Room 401 Peoria, IL 61602-1232				AUTHORIZED REPRESENTATIVE				