

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (212) 254-9200

FAX: (866) 467-7847

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

## INSURERS AFFORDING COVERAGE

INSURER A: Zurich American Ins Co

INSURER B: Steadfast Insurance Company

INSURER C:

INSURER D:

INSURER E:

**COVERAGES** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown. See SLIP May Apply

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
A	AUTOMOBILE LIABILITY	BAP823989104	06/01/02	06/01/03	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
A	<input checked="" type="checkbox"/> ANY AUTO	AUTOMOBILE - COMMERCIAL	06/01/02	06/01/03	BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS	TAP2984005-02			BODILY INJURY (Per accident)	
	<input type="checkbox"/> SCHEDULED AUTOS	Auto TX			PROPERTY DAMAGE (Per accident)	
	<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: EA ACC	
					AGG	
B	EXCESS LIABILITY	AUC297117902	06/01/02	06/01/03	EACH OCCURRENCE	\$50,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	Umbrella Liability			AGGREGATE	\$50,000,000
	<input type="checkbox"/> DEDUCTIBLE					
	<input checked="" type="checkbox"/> RETENTION \$10,000					
A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WC823988207	06/01/02	06/01/03	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
A		WC (AOS INCL CA & NV)	06/01/02	06/01/03	E.L. EACH ACCIDENT	\$1,000,000
		WC202911305			E.L. DISEASE-POLICY LIMIT	\$1,000,000
		WC (WA & WY)			E.L. DISEASE-EA EMPLOYEE	\$1,000,000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CERTIFICATE HOLDER IS ADDED AS AN ADDITIONAL INSURED UNDER THE GENERAL LIABILITY POLICY FOR CLAIMS ARISING OUT OF THE NAMED INSURED'S OPERATIONS AND/ OR PRODUCTS.

## CERTIFICATE HOLDER

SERVICE MERCHANDISE  
ATTN: TERRY JAMES, INS. DEPT.  
P.O. BOX 9085  
MISSION VIEJO CA 92690-9085 USA

## CANCELATION

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 255 (7/97)

ACORD CORPORATION 1998

Certificate No.

570007259260

Holder Identifier

**ACORD****CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YY)

08/29/03

PRODUCER  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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PHONE: (212) 254-9200

FAX: (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**

Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B: Steadfast Insurance Company

INSURER C:

INSURER D:

INSURER E:

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
A	AUTOMOBILE LIABILITY	BAP823989104	06/01/02	06/01/03	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
A	<input checked="" type="checkbox"/> ANY AUTO	AUTOMOBILE - COMMERCIAL	06/01/02	06/01/03	BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS	TAP2984005-02			BODILY INJURY (Per accident)	
	<input type="checkbox"/> SCHEDULED AUTOS	Auto TX			PROPERTY DAMAGE (Per accident)	
	<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: EA ACC	
					AGG	
B	EXCESS LIABILITY	AUC297117902	06/01/02	06/01/03	EACH OCCURRENCE	\$50,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	Umbrella Liability			AGGREGATE	\$50,000,000
	<input type="checkbox"/> DEDUCTIBLE					
	<input checked="" type="checkbox"/> RETENTION \$10,000					
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC823988207	06/01/02	06/01/03	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS	OTH-ER
A		WC (AOS INCL CA & NV)	06/01/02	06/01/03	E.L. EACH ACCIDENT	\$1,000,000
		WC202911305			E.L. DISEASE-POLICY LIMIT	\$1,000,000
		WC (WA & WY)			E.L. DISEASE-EA EMPLOYEE	\$1,000,000
	OTHER					

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**

Re: Account No. 0942902 - Various Equipment The Certificate Holder is added as an loss payee as their interest may appear.

**CERTIFICATE HOLDER****CANCELLATION**

Minolta Business Systems  
Attn: Customer Service Dept  
15325 S.E. 30th Place, Ste 100  
Bellevue WA 98007 USA

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AUTHORIZED REPRESENTATIVE

ACORD 25-S (7/97)

ACORD CORPORATION 1988

Certificate No.

570007259263

Holder Identifier

**ACORD™****CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YY)  
08/29/03**PRODUCER**Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USATHIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY  
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PHONE: (212) 254-9200

FAX: (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B: Steadfast Insurance Company

INSURER C:

INSURER D:

INSURER E:

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A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE \$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US) 8829596	06/01/02	06/01/03	FIRE DAMAGE (Any one fire) \$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	GL (CAN)			MED EXP (Any one person) \$10,000
					PERSONAL & ADV INJURY \$2,000,000
					GENERAL AGGREGATE \$2,000,000
					PRODUCTS - COMP/OP AGG \$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				
A	AUTOMOBILE LIABILITY	BAP823989104	06/01/02	06/01/03	COMBINED SINGLE LIMIT (Ex accident) \$2,000,000
A	<input checked="" type="checkbox"/> ANY AUTO	AUTOMOBILE - COMMERCIAL	06/01/02	06/01/03	BODILY INJURY (Per person)
	<input type="checkbox"/> ALL OWNED AUTOS	TAP2984005-02			BODILY INJURY (Per accident)
	<input type="checkbox"/> SCHEDULED AUTOS	Auto TX			PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC
					AUTO ONLY: AGG
B	EXCESS LIABILITY	AUC297117902	06/01/02	06/01/03	EACH OCCURRENCE \$50,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	Umbrella Liability			AGGREGATE \$50,000,000
	<input type="checkbox"/> DEDUCTIBLE				
	<input checked="" type="checkbox"/> RETENTION \$10,000				
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC823988207	06/01/02	06/01/03	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
A		WC (AOS INCL CA & NV)	06/01/02	06/01/03	E.L. EACH ACCIDENT \$1,000,000
		WC202911305			E.L. DISEASE-POLICY LIMIT \$1,000,000
		WC (WA & WY)			E.L. DISEASE-EA EMPLOYEE \$1,000,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
Re: Grants Pass, Or Division**CERTIFICATE HOLDER**Broer Co.  
Attn: Bob Gallagher  
P.O. Box 2005  
Grants Pass OR 97526 USA**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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE


ACORD 25-S (7/97)

ACORD CORPORATION 1988

Certificate No:

570007259764

Holder Identifier:

ACORD™		CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YY) 08/29/03	
<b>PRODUCER</b> Aon Risk Services, Inc. of New York 55 East 52nd Street New York NY 10055 USA		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.			
PHONE: (212) 254-9200      FAX: (866) 467-7847		<b>INSURERS AFFORDING COVERAGE</b>			
<b>INSURED</b> Core-Mark International Inc 395 Oyster Point Blvd. Ste 415 So. San Francisco CA 94080-4080 USA		INSURER A: Zurich American Ins Co			
		INSURER B: Steadfast Insurance Company			
		INSURER C:			
		INSURER D:			
		INSURER E:			
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A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE \$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US) 8829596	06/01/02	06/01/03	FIRE DAMAGE (Any one fire) \$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	GL (CAN)			MED EXP (Any one person) \$10,000
					PERSONAL & ADV INJURY \$2,000,000
					GENERAL AGGREGATE \$2,000,000
					PRODUCTS - COMP/OP AGG \$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
A	AUTOMOBILE LIABILITY	BAP823989104	06/01/02	06/01/03	COMBINED SINGLE LIMIT (Ea accident) \$2,000,000
A	<input checked="" type="checkbox"/> ANY AUTO	AUTOMOBILE - COMMERCIAL	06/01/02	06/01/03	BODILY INJURY (Per person)
	<input type="checkbox"/> ALL OWNED AUTOS	TAP2984005-02			BODILY INJURY (Per accident)
	<input type="checkbox"/> SCHEDULED AUTOS	Auto TX			PROPERTY DAMAGE (Per accident)
	<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: EA ACC AGG
B	EXCESS LIABILITY	AUC297117902	06/01/02	06/01/03	EACH OCCURRENCE \$50,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	Umbrella Liability			AGGREGATE \$50,000,000
	<input type="checkbox"/> DEDUCTIBLE				
	<input checked="" type="checkbox"/> RETENTION \$10,000				
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC823988207	06/01/02	06/01/03	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
A		WC (AOS INCL CA & NV)	06/01/02	06/01/03	E.L. EACH ACCIDENT \$1,000,000
		WC202911305			E.L. DISEASE-POLICY LIMIT \$1,000,000
		WC (WA & WY)			E.L. DISEASE-EA EMPLOYEE \$1,000,000
	OTHER				
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS MERIDIAN INDUSTRIAL TRUST, INC. (LANDLORD) & CERT. HOLDER (PROP. MGMT.) ARE ADDED AS ADD'L INSDS. UNDER THE GL POL. FOR CLAIMS ARISING OUT OF THE NAMED INSD'S OPS.&/OR PROD.RE:BLDG.811. CERT.HOLD.IS GRANTED A WAIVER OF SUB.					
<b>CERTIFICATE HOLDER</b>		<b>CANCELLATION</b>			
INSIGNIA COMMERCIAL GROUP, INC P.O. BOX 2164 GREENVILLE SC 29602-2164 USA		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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.			
		AUTHORIZED REPRESENTATIVE 			
ACORD 25 (7/97)		ACORD CORPORATION 1988			

Certificate No.:

570007259265

Holder Identifier:

**ACORD****CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YY)

08/29/03

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PHONE: (866) 266-7475

FAX: (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
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	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC					
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	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	
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	<input type="checkbox"/> NON OWNED AUTOS					
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	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	
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	EXCESS LIABILITY				EACH OCCURRENCE	
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	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- TORY LIMITS	OTH- ER
					E.L. EACH ACCIDENT	
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					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**Kmart Resource Center is included as an additional insured with respect to liabilities arising out of the  
operations by the name insured.**CERTIFICATE HOLDER**Kmart resource Center  
Attn: Rick Weaver  
Vendor Administration C2  
3100 W. Big Beaver Road  
Troy MI 48064-3163 USA**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,  
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AUTHORIZED REPRESENTATIVE

ACORD 45 (Rev. 1/99)

Certificate No.

570007759019

Holder Identifier

ACORD CORPORATION 1998

**ACORD™ CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YY)  
08/29/03**PRODUCER**  
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FAX: (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

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A	<b>GENERAL LIABILITY</b>	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	GL (CAN)			MED EXP (Any one person)	\$10,000
					PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	
					AGG	
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATUTORY LIMITS	OTHER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	<b>OTHER</b>					

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**

Sears Roebuck and Co are included as additional insureds with respect to liabilities arising out of operations by the named insured. Account number: SE00003552

**CERTIFICATE HOLDER**Sears Roebuck and Co.  
Insurance Compliance  
P.O. Box 12010-SE  
Hemet CA 92546 USA**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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25 1/99

ACORD CORPORATION 1988

Certificate No.

570007250023

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

**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.**

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

### INSURED

Core-Mark International Inc  
395 Oyster Point Blvd, Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown.

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COM/OP AGG	\$2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<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: EA ACC AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

RE: LEASE NO. #244269001- NEW WASTE EQUIPMENT (COMPACTOR) FIRST SIERRA RECEIVABLES 111, INC. IS INCLUDED AS AN ADDITIONAL INSURED.

### CERTIFICATE HOLDER

AMEX BUSINESS FINANCE  
P.O. BOX 660631  
DALLAS TX 75266-0631 USA

### 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-S (7/97)

ACORD CORPORATION 1988

Certificate No.

570007259027

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (866) 266-7475 FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co  
INSURER B:  
INSURER C:  
INSURER D:  
INSURER E:

## COVERAGES This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown.

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY: AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
NORTHWEST BUILDING LLC, D/B/A/ LAKEWOOD INDUSTRIAL PARK IS INCLUDED AS ADDITIONAL INSURED AS RESPECTS FOR THE LEASED PREMISES LOCATED AT BLDG. #8B-4429 95TH STREET, S.W., SUITE C. LAKEWOOD, WA 98499.

## CERTIFICATE HOLDER

NORTHWEST BUILDING LLC  
D/B/A/ LAKEWOOD INDUSTRIAL PARK  
P.O. BOX 98905  
LAKEWOOD WA 98498-0905 USA

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-S (7/97)

ACORD CORPORATION 1988

Certificate No. 57000725030

Holder Identifier



ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

08/29/03

## PRODUCER

Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURED

Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

## INSURERS AFFORDING COVERAGE

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

## COVERAGES This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown.

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GL0823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US) 8829596	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	GL (CAN)			MED EXP (Any one person)	\$10,000
					PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<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 EA ACC AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

NORTHWEST BUILDING LLC, D/B/A/ LAKEWOOD INDUSTRIAL PARK IS INCLUDED AS ADDITIONAL INSURED AS RESPECTS FOR THE LEASED PREMISES LOCATED AT BLDG. #8B-4429 95TH STREET, S.W., SUITE C. LAKEWOOD, WA 98499.

## CERTIFICATE HOLDER

NORTHWEST BUILDING LLC  
D/B/A/ LAKEWOOD INDUSTRIAL PARK  
P.O. BOX 98905  
LAKEWOOD WA 98498-0905 USA

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 45 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 55 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007259033

Holder Identifier

ACORD™

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

08/29/03

## PRODUCER

Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

## INSURED

Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY: AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

RE: 3650 FRASER STREET, SUITE, AURORA, CO 80011. PRIM UPLAND DISTRIBUTION CENTER ASSOCIATES, LLC AS OWNER AND COLLIERS BENNETT & KAHNWEILER, INC. AS MANAGING AGENT ARE INCLUDED AS ADDITIONAL INSURED.

## CERTIFICATE HOLDER

PRIM UPLAND DISTRIBUTION CENTER ASSOC  
AND COLLIERS BENNETT & KAHNWEILER, INC.  
13900 E. HARVARD AVENUE, SUITE 210  
AURORA CO 80014 USA

## 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-97 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007250025

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (866) 266-7475 FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES:** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown below.

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<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: EA ACC	
					AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

RE: 3650 FRASER STREET, AURORA, CO  
PRIM UPLAND DISTRIBUTION CENTER ASSOCIATES, LLC AS OWNER AND COLLIERS BENNETT & KAHNWEILER, INC. AS MANAGING AGENT  
ARE INCLUDED AS INSURED.

## CERTIFICATE HOLDER CANCELLATION

PRIM UPLAND DISTRIBUTION CENTER ASSOC  
AND COLLIERS BENNETT & KAHNWEILER, INC.  
13900 E. HARVARD AVENUE, SUITE 210  
AURORA CO 80014 USA

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-S1797

ACORD CORPORATION 1988

Certificate No. 570007759038

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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PHONE: (866) 266-7475 FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES:** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown.

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GL0823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY : AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
RE: POLICY #CCP-647869-00

## CERTIFICATE HOLDER

GOLDEN EAGLE INSURANCE CORPORATION  
525 B STREET  
SAN DIEGO CA 92186-5411 USA

## 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 258 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007259041

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

### INSURED

Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<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: EA ACC	
					AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
LEGO GLOBAL FAMILY ATTRACTIONS IS INCLUDED AS AN ADDITIONAL INSURED.

### CERTIFICATE HOLDER

### CANCELLATION

LEGO GLOBAL FAMILY ATTRACTIONS  
ATTN: EDWINA SIPIN  
5790 FLEET STREET, SUITE 310  
CARLSBAD CA 92008 USA

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 75 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007250044

Holder Identifier

**ACORD****CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YY)  
08/29/03PRODUCER  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USATHIS 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  
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PHONE: (866) 266-7475

FAX: (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
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	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
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	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**

DON ANDERSON INCORPORATED IS INCLUDED AS AN ADDITIONAL INSURED WITH RESPECT TO LIABILITIES ARISING OUT OF OPERATIONS BY THE NAMED INSURED. RE: CONTRACT #3713/2214.

**CERTIFICATE HOLDER****CANCELLATION**DON ANDERSON INCORPORATED  
800 AIRPORT BLVD., SUITE 311  
BURLINGAME CA 94010 USA

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25 5/7/97

ACORD CORPORATION 1988

Certificate No.

570007759046

Holder Identifier

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
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	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	
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					AUTO ONLY: AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

## CERTIFICATE HOLDER

LUCENT TECHNOLOGIES  
P.O. BOX 93000  
CHICAGO IL 60673-3000 USA

## CANCELLATION

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AUTHORIZED REPRESENTATIVE

ACORD 25 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007250049

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

### INSURED

Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
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	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	
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	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
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	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
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					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

### DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

GELSON'S MARKETS IS INCLUDED AS AN ADDITIONAL INSURED FOR CLAIMS ARISING OUT OF THE NAMED INSURED'S OPERATIONS AND/OR PRODUCTS AS PER THE BROAD FORM VENDORS ENDORSEMENT.

### CERTIFICATE HOLDER

GELSON'S MARKETS  
ATTN: INSURANCE ADMINISTRATION  
P.O. BOX 512256  
LOS ANGELES CA 90051 USA

### 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-97(97)

ACORD CORPORATION 1988

Certificate No.

570007250052

Holder Identifier



**ACORD™****CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YY)

08/29/03

**PRODUCER**Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY  
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PHONE (866) 266-7475

FAX (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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					GENERAL AGGREGATE	\$2,000,000
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					AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**

RE: SCHEDULE #074: (16) 7025-4115 128MB MEMORY BOARDS. ECR AND ITS ASSIGNS ARE INCLUDED AS ADDITIONAL INSURED RELATIVE TO THE USE AND OPERATION OF THE EQUIPMENT.

**CERTIFICATE HOLDER**EL CAMINO RESOURCES LTD (ECR)  
ATTN: INSURANCE COORDINATOR  
21051 WARNER CENTER LANE  
WOODLAND HILLS CA 91367 USA**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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-5 (7/97)

Certificate No.

570007259055

Holder Identifier

ACORD CORPORATION 1988

**ACORD****CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YY)  
08/29/03PRODUCER  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USATHIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY  
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CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE  
COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475

FAX: (866) 467-7847

**INSURERS AFFORDING COVERAGE****INSURED**Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown below.

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COM/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY : AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

RE: SCHEDULE #072 ATTACHED. ECR AND ITS ASSIGNS ARE INCLUDED AS ADDITIONAL INSUREDS RELATIVE TO THE USE AND OPERATION OF THE EQUIPMENT.

**CERTIFICATE HOLDER**EL-CAMINO RESOURCES, LTD.  
ATTN: INSURANCE COORDINATOR  
21051 WARNER CENTER LANE  
WOODLAND HILLS CA 91367 USA**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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 15-1 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007259057

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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.

PHONE: (866) 266-7475 FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES:** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown.

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
RE: CIRCUS CIRCUS IN RENO

## CERTIFICATE HOLDER

## CANCELLATION

CIRCUS CIRCUS HOTEL  
ATTN: ROBERT T. FREUDENTHALER  
500 NORTH SIEME STREET  
RENO NV 89503 USA

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-S-7/97

ACORD CORPORATION 1988

Certificate No.

570007759058

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS  
CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE  
COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	
					AGG	
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	<b>OTHER</b>					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

GE CAPITAL IS INCLUDED AS ADDITIONAL INSURED BUT ONLY WITH RESPECT TO LIABILITIES ARISING OUT OF THE OPERATIONS OF THE NAMED INSURED.

## CERTIFICATE HOLDER

GE CAPITAL INSURANCE DEPT.  
P.O. BOX 3083  
CEDAR RAPIDS IA 52406-3083 USA

## 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007259060

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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A	GENERAL LIABILITY	GL0823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<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: EA ACC	
					AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
ECR AS OWNER AND LESSOR OF TEH EQUIPMENT AND ECR'S ASSIGNS ARE INCLUDED AS ADDITIONAL INSURED AS RESPECTS, ATTACHMENT A SCHEDULES 67-70 MASTER LEASE NO. 2858.

## CERTIFICATE HOLDER

EL CAVINO RESOURCES, LTD.  
ATTN: INSURANCE COORDINATOR  
21051 WARNER CENTER LANE  
WOODLAND HILLS CA 91367 USA

## 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-S-7-97

ACORD CORPORATION 1988

Certificate No.

570007250062

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475

FAX: (866) 467-7847

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

## INSURERS AFFORDING COVERAGE

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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A	GENERAL LIABILITY	GLO823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY: AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
CERTIFICATE HOLDER IS INCLUDED AS AN ADDITIONAL INSURED FOR LIABILITIES ARISING OUT OF THE NAMED INSURED'S OPERATIONS AND/OR PRODUCTS.

## CERTIFICATE HOLDER

COUNTY OF LOS ANGELES  
31320 CASTAIC ROAD  
CASTAIC CA 91384 USA

## 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 255 (7/97)

Certificate No.

570007250063

Holder Identifier

ACORD CORPORATION 1988

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475 FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

**INSURED**  
Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<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: EA ACC AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
CERTIFICATE HOLDER IS INCLUDED AS AN ADDITIONAL INSURED (EXCEPT FOR WORKERS COMPENSATION) FOR LIABILITIES ARISING OUT OF THE NAMED INSURED'S OPERATIONS AND/OR PRODUCTS.

## CERTIFICATE HOLDER

## CANCELLATION

CROWN WEST REALTY, LLC.  
ATTN: MARCI COMBS  
3808 N. SULLIVAN ROAD  
SPOKANE WA 99216-1670 USA

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25-3 (7/97)

ACORD CORPORATION 1988

Certificate No.

570007750065

Holder Identifier

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
08/29/03

**PRODUCER**  
Aon Risk Services, Inc. of New York  
55 East 52nd Street  
New York NY 10055 USA

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COVERAGE AFFORDED BY THE POLICIES BELOW.

PHONE: (866) 266-7475

FAX: (866) 467-7847

## INSURERS AFFORDING COVERAGE

### INSURED

Core-Mark International Inc  
395 Oyster Point Blvd. Ste 415  
So. San Francisco CA 94080-4080 USA

INSURER A: Zurich American Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**COVERAGES:** This Certificate is not intended to specify all endorsements, coverages, terms, conditions and exclusions of the policies shown.

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	GL0823989004	06/01/02	06/01/03	EACH OCCURRENCE	\$2,000,000
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	GL (US)	06/01/02	06/01/03	FIRE DAMAGE (Any one fire)	\$1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	8829596			MED EXP (Any one person)	\$10,000
		GL (CAN)			PERSONAL & ADV INJURY	\$2,000,000
					GENERAL AGGREGATE	\$2,000,000
					PRODUCTS - COMP/OP AGG	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	
	<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 (Per accident)	
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	
					AUTO ONLY: AGG	
	EXCESS LIABILITY				EACH OCCURRENCE	
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	
	<input type="checkbox"/> DEDUCTIBLE					
	<input type="checkbox"/> RETENTION					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	
					E.L. DISEASE-POLICY LIMIT	
					E.L. DISEASE-EA EMPLOYEE	
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

THE CERTIFICATE HOLDER IS ADDED AS AN ADDITIONAL INSURED UNDER THE GL POLICY FOR CLAIMS ARISING OUT OF THE NAMED INSURED'S OPERATIONS OF PRODUCT.

### CERTIFICATE HOLDER

DEPARTMENT OF CONSUMER AND BUSINESS SVC.  
350 WINTER ST. NE, ROOM 21  
SALEM OR 97310 USA

### 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 258 (7/97)

Certificate No.

570007259067

Holder Identifier

ACORD CORPORATION 1988