

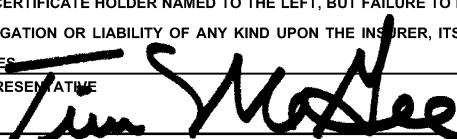
ACORD™ CERTIFICATE OF LIABILITY INSURANCE		1496177	DATE (MM/DD/YYYY) 12/04/08
PRODUCER K & K Insurance Group, Inc. 1712 Magnavox Way P.O. Box 2338 Fort Wayne, In 46801	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.		
INSURED GOLD WING ROAD RIDERS (SEE GAI3001) 21423 N 11TH AVENUE PHOENIX, AZ 85027	INSURERS AFFORDING COVERAGE INSURERA: SCOTTSDALE INSURANCE COMPANY INSURERB: NATIONAL CASUALTY COMPANY INSURERC: INSURERD: INSURERE:	NAIC #	

COVERAGES

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	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
B		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR Owners & Contractors <input checked="" type="checkbox"/> \$100,000 E&O GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	KEO0000528000	12:01AM 12/31/08	12:01AM 12/31/09	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ NONE PRODUCTS - COMP/OP AGG \$ 5000000 Part Lgl Liab \$ 1000000
B		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	KKO0000528500	12:01AM 12/31/08	12:01AM 12/31/09	COMBINED SINGLE LIMIT (Ea accident) \$ 1000000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> STRAIGHT <input type="checkbox"/> DEDUCTIBLE RETENTION \$	XKS0000528100	12:01AM 12/31/08	12:01AM 12/31/09	EACH OCCURRENCE \$ 1000000 AGGREGATE \$ 1000000 \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 EVENT TYPE AND DATE: VARIOUS AS REPORTED AND APPROVED BY THE COMPANY
 LOCATION: VARIOUS AS REPORTED AND APPROVED BY THE COMPANY
 ADDITIONAL INSURED: SEE ATTACHED ADDENDUM

CERTIFICATE HOLDER CONSTANCE KELLY, AGENT GOLD WING ROAD RIDERS (SEE GAI3001) 21423 N 11TH AVENUE PHOENIX, AZ 85027	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> 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 INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

A D D E N D U M P A G E F O R C E R T I F I C A T E

K & K I N S U R A N C E G R O U P , I N C .

CERTIFICATE: 1496177

DATE ISSUED: 12/04/08

ACCOUNT NAME: GOLD WING ROAD RIDERS (SEE GAI3001)

TYPE OF INSURANCE:	POLICY NUMBER:
GENERAL LIABILITY	KEO0000528000
AUTOMOBILE LIABILITY	KKO0000528500
EXCESS LIABILITY	XKS0000528100

ADDITIONAL INSUREDS PER POLICY:

- A. ANY PERSON OR ORGANIZATION ENGAGED IN OPERATING, MANAGING SANCTIONING, OR SPONSORING THE COVERED PROGRAM OR PROVIDING THE PREMISES FOR A COVERED PROGRAM, INCLUDING OFFICIALS OF THE COVERED PROGRAM.
- B. ANY PARTICIPANT EXCLUDING DRIVERS, "COMPETITION VEHICLE" OWNERS AND "COMPETITION VEHICLE" SPONSOR AND OFFICIALS OF THE COVERED PROGRAM.
- C. ANY PARTICIPANT DRIVER, BUT ONLY WITH THE RESPECTS TO BODILY INJURY OR PROPERTY DAMAGE TO PERSONS OTHER THAN ANY OTHER DRIVER.