							CL	JSTO-8		OP ID: CW
Ą	CORD [®]	EF	RTI	FICATE OF LIA		ITY INS	SURAN	CE		MM/DD/YYYY)
C B	HIS CERTIFICATE IS ISSUED AS A ERTIFICATE DOES NOT AFFIRMAT ELOW. THIS CERTIFICATE OF INS EPRESENTATIVE OR PRODUCER, A	IVEL` SURA	Y OF NCE	R NEGATIVELY AMEND, DOES NOT CONSTITUT	EXTE	ND OR ALT	ER THE CO	VERAGE AFFORDED	TE HOI BY THE	E POLICIES
lf	IPORTANT: If the certificate holder SUBROGATION IS WAIVED, subject is certificate does not confer rights t	to th	ne te	rms and conditions of th	e polic	y, certain p	olicies may			
PRO	DUCER			-845-9120	CONTA	^{c⊤} Steven J	I. Alonzo			
2727 St L	/itt Ins - Steven J. Alonzo 7 Telegraph Rd ouis, MO 63125 ren J. Alonzo				PHONE (A/C, No E-MAIL ADDRE	_{o, Ext):} 314-84 _{SS:} sjalonzo	l5-9120 @dewittins	FAX (A/C, No)	314-84	15-9518
							_	DING COVERAGE A Mutual Co		NAIC #
INSU	RED				INSURE		Insulance	A Mutual CO		
PO E	tom Crete Inc 3ox 893				INSURE					
St. F	eters, MO 63376				INSURE	RD:				
					INSURE					
	VERAGES CER		× • • •	NUMBER:	INSURE	RF:				
	HIS IS TO CERTIFY THAT THE POLICIES		-	-	/E BEE	N ISSUED TO		REVISION NUMBER:	HE POL	
IN CI	DICATED. NOTWITHSTANDING ANY RI ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQUIR PERT	EME AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORDE	OF AN` ED BY	Y CONTRACT	OR OTHER I	DOCUMENT WITH RESPE	ст то	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	s	
A	COMMERCIAL GENERAL LIABILITY			TC 3315453		12/15/2022	12/15/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ \$	1,000,000 100,000
								MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	1,000,000 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO- JECT LOC							GENERAL AGGREGATE	\$	2,000,000
								PRODUCTS - COMP/OP AGG	\$,
A								COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X ANY AUTO			A3315454		12/15/2022	12/15/2023	BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY SCHEDULED							BODILY INJURY (Per accident)	\$	
	HIRED AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$ \$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$							PER OTH-	\$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			WC3315455		12/15/2022	12/15/2023	PER OTH- STATUTE ER		1,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A					,	E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEI	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT		1,000,000
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORE	0 101, Additional Remarks Schedu	le, may b	e attached if moi	re space is requir	ed)		
					0.4.1.6					
	RTIFICATE HOLDER			ΑΑΑΑΑΑΑ	CANC	ELLATION]
								ESCRIBED POLICIES BE (
					THE ACC	EXPIRATION ORDANCE WI	N DATE THE TH THE POLIC	EREOF, NOTICE WILL CY PROVISIONS.	BE DE	LIVERED IN
	Thomas Walker Construe	tion	,							
	1771 San Luis Rey Pkwy						·			
	Fenton, MO 63026				S	±1.	Clos	230		
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