

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

_							00101		08/0	04/2016	
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).											
PRODUCER						CONTACT NAME: GARY PIGG PHONE (A/C, No, Ext): (615) 822-1989 FAX (A/C, No): (615) 822-5858					
PIGG INSURANCE 120 ANDERSON LANE						PHONE (AC, No. Ext): 615) 822-1989 FAX (A/C, No): 615) 822-5858 E-MAIL ADDRESS: GARY@PIGGINSURANCE.COM					
120 ANDERSON LANE					ADDRE						
HENDERSONVILLE TN 37075-					INSURER(S) AFFORDING COVERAGE					NAIC #	
INSURED						R B :HOUSTO				42374	
M3 TECHNOLOGY GROUP, INC DBA					INSURER C :						
MULTI-MEDIA MASTERS, INC.					INSURER D :						
925 AIRPARK CENTER DR.					INSURER E :						
NASHVILLE TN 37217-					INSURER F :						
	COVERAGES CERTIFICATE NUMBER:					REVISION NUMBER:					
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 INSR	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	6		
A	GENERAL LIABILITY	Y		ACP GLKO 5635646754		06/01/2016		EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000	
	X COMMERCIAL GENERAL LIABILITY							PREMISES (Ea occurrence)	\$	100,000	
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$	15,000	
	X CONTRACTUAL LIABILITY							PERSONAL & ADV INJURY	\$	1,000,000	
								GENERAL AGGREGATE	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- LOC					, ,	/ /	PRODUCTS - COMP/OP AGG DEDUCTIBLE	\$ \$	2,000,000	
A				ACP BAK 5635646754		06/01/2016	06/01/2017	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
1	X ANY AUTO					1 1	/ /	BODILY INJURY (Per person)	<u> </u>	1,000,000	
	ALL OWNED SCHEDULED AUTOS					1 1	/ /	BODILY INJURY (Per accident)	\$		
	X HIRED AUTOS X NON-OWNED AUTOS					/ /	/ /	PROPERTY DAMAGE (Per accident)	\$		
	x					/ /	/ /		\$		
A	X UMBRELLA LIAB X OCCUR			ACP CAF 5635646754		06/01/2016	06/01/2017	EACH OCCURRENCE	\$	10,000,000	
	EXCESS LIAB CLAIMS-MADE					/ /	/ /	AGGREGATE	\$	10,000,000	
	DED RETENTION \$ C					/ /	/ /		\$		
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N			ACP WCK 5635646754				X WC STATU- TORY LIMITS OTH- ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE Y	N/A		BRUCE CORDELL IS EXC	LUDED			E.L. EACH ACCIDENT	\$	1,000,000	
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE		1,000,000	
	DÉSÉRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
A	INLAND MARINE			ACP CIM 5635646754		06/01/2016		STORED MATERIALS		1,500,000	
В	PROFESSIONAL LIABILITY			HCC 1463643		10/29/2015	10/29/2016	1,000,000/2,000,000 DED		10,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ttach	ACORD 101, Additional Remarks	Schedule,	if more space is	required)				
LFUCG IS LISTED AS ADDITIONAL INSURED AS RESPECTS THE GENERAL LIABILITY POLICY.											
CERTIFICATE HOLDER CANCELLATION											
() -	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.									
200 E MAIN ST.					AUTHORIZED REPRESENTATIVE						
					$\square \square \square \square$						
LEXINGTON KY 40507-					K Say 50						

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