



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/27/2015

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

STAR Insurance - Fort Wayne Office
2130 East Dupont Road
Fort Wayne IN 46825

INSURED
Road Runners Club of America/2015 and its
Member Clubs
1501 Lee Highway, Suite 140
Arlington VA 22209

CONTACT NAME: Margaret M. Mayers	INSURER A: National Casualty Company
PHONE: (260) 467-5689	INSURER B: Nationwide Life Insurance Co.
FAX: (260) 467-5691	INSURER C:
E-MAIL: address: margaret.mayers@starfinancial.com	INSURER D:
INSURER(S) AFFORDING COVERAGE	INSURER E:
NAIC #	INSURER F:

COVERAGES
CERTIFICATE NUMBER: 2015 - \$1M A.I.
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	INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		KRO-0000004913200	12/31/2014	12/31/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (ea occurrence) 500,000 MED EXP (Any one person) 5,000 PERSONAL & ADV INJURY 1,000,000 GENERAL AGGREGATE Unlimited PRODUCTS - COMP/OP AGG 1,000,000 Abuse & Molestation 500,000
A	LEGAL LIABILITY TO PARTICIPANT \$1,000,000 GENL AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO <input type="checkbox"/> LOC <input type="checkbox"/>		aggregate \$5,000,000			
A	ANY AUTO ALL OWNED AUTOS NON-OWNED AUTOS SCHEDULED AUTOS	<input checked="" type="checkbox"/>	KRO-0000004913200	12/31/2014	12/31/2015	BODILY INJURY (per person) 1,000,000 BODILY INJURY (per accident) 500,000 PROPERTY DAMAGE (per accident) 500,000
B	UMBRELLA LIAB OCCUR					EACH OCCURRENCE \$
B	EXCESS LIAB CLAIMS-MADE					AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) DESCRIPTION OF OPERATIONS below	N/A	SPX-0000026656100	12/31/2014	12/31/2015	AD & Specific Loss \$10,000 Excess Medical \$2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED AS RESPECTS THEIR INTEREST IN THE OPERATIONS OF THE NAMED INSURED. DATE OF EVENT(S) : 10/04/15 Maine Marathon - Road Race and will hang a banner in the City of Portland to promote the Maine Marathon 3 weeks prior to event on Congress St. and Baxter Blvd. INSURED CLUB/EVENT MEMBER: Maine Track Club, Attn: Howard Spear; POB 8008, Portland, ME 04104

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.

AUTHORIZED REPRESENTATIVE

John LeVeer/LIO
John LeVeer

10/04/15 City of Portland
Attached: KRGL56
55 Portland
Portland, ME 04101

ACORD 25 (2010/05)

AUTHORIZED REPRESENTATIVE _____ DATE _____

The policy is amended to include as an additional insured any person or organization of the types indicated by an "X" in any boxes shown below, but only with respect to liability arising out of your operations:

Owners and/or lessors of the premises leased, rented or loaned to you, subject to the following additional exclusions:

a. This insurance applies only to an "occurrence" which takes place while you are a tenant and in the premises;

b. This insurance does not apply to "bodily injury" or "property damage" resulting from structural alterations, new construction or demolition operations performed by or on behalf of the owner and/or lessor of the premises;

Coaches, Officials and Volunteers are Additional insureds but only while Acting within the scope of their duties For the insured (others by request and Endorsement, subject to underwriting Approval). Medical Personnel is available at 2% of GL premium or a minimum premium of \$250, whichever is Greater.

Sponsors

Co-Promoters

Any individual person(s) or organization(s) listed below

c. This insurance does not apply to liability of the owners and/or lessors for "bodily injury" or "property damage" arising out of any design defect or structural maintenance of the premises or loss caused by a premises defect. With respect to any additional insured included under this policy, this insurance does not apply to any negligence of such additional insured

COMMERCIAL GENERAL LIABILITY COVERAGE PART

This endorsement modifies insurance provided under the following:

ADDITIONAL INSURED OWNERS AND/OR LESSORS OF PREMISES, SPONSORS OR CO-PROMOTERS

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

K900004810200		12/31/14		Road Runners Club of America & Its Member Clubs	
ATTACHED TO AND FORMING A PART OF POLICY NUMBER		ENDORSEMENT EFFECTIVE DATE (12:01 A.M. STANDARD TIME)		NAMED INSURED	
				AGENT NO.	

National Casualty Company

ENDORSEMENT NO.