

# CERTIFICATE OF LIABILITY INSURANCE

American Family Insurance Company

American Family Mutual Insurance Company if selection box is not checked.

6000 American Pky Madison, Wisconsin 53783-0001

Insured's Name and Address

Kids Express Train Llc  
PO Box 1462  
Maple Grove, MN 55311-6462

Agent's Name, Address and Phone Number (Agt./Dist.)

Jeffrey Mayhew Agency, Inc. (763) 551-1074  
Jeffrey Mayhew, CLU  
3390 Annapolis Lane Unit C  
Plymouth, MN 55447-5379 (420/086)

**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 listed below.**

COVERAGES				
This is to certify that 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.				
TYPE OF INSURANCE	POLICY NUMBER	POLICY DATE		LIMITS OF LIABILITY
		EFFECTIVE (Mo, Day, Yr)	EXPIRATION (Mo, Day, Yr)	
<b>Homeowners/ Mobilehomeowners Liability</b>				Bodily Injury and Property Damage Each Occurrence \$ ,000
<b>Boatowners Liability</b>				Bodily Injury and Property Damage Each Occurrence \$ ,000
<b>Personal Umbrella Liability</b>				Bodily Injury and Property Damage Each Occurrence \$ ,000
<b>Farm/Ranch Liability</b>				Farm Liability & Personal Liability Each Occurrence \$ ,000 Farm Employer's Liability Each Occurrence \$ ,000
<b>Workers Compensation and Employers Liability †</b>				Statutory ***** Each Accident \$ ,000 Disease - Each Employee \$ ,000 Disease - Policy Limit \$ ,000
<input checked="" type="checkbox"/> <b>General Liability</b> <input checked="" type="checkbox"/> Commercial General Liability (occurrence) <input type="checkbox"/> <input type="checkbox"/>	22-XD1154-01-00	6/21/2008	6/21/2009	General Aggregate \$ 4,000 ,000 Products - Completed Operations Aggregate \$ 4,000 ,000 Personal and Advertising Injury \$ 2,000 ,000 Each Occurrence \$ 2,000 ,000 Damage to Premises Rented to You \$ 100 ,000 Medical Expense (Any One Person) \$ 5 ,000
<b>Businessowners Liability</b>				Each Occurrence †† \$ ,000 Aggregate †† \$ ,000
<b>Liquor Liability</b>				Common Cause Limit \$ ,000 Aggregate Limit \$ ,000
<b>Automobile Liability</b> <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Auto <input type="checkbox"/> Nonowned Autos <input type="checkbox"/>				Bodily Injury - Each Person \$ ,000 Bodily Injury - Each Accident \$ ,000 Property Damage \$ ,000 Bodily Injury and Property Damage Combined \$ ,000
<b>Excess Liability</b> <input type="checkbox"/> Commercial Blanket Excess <input type="checkbox"/>				Each Occurrence/Aggregate \$ ,000
<b>Other (Miscellaneous Coverages)</b>				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / RESTRICTIONS / SPECIAL ITEMS				
Stores-Other Than Not-For-Profit				
† The individual or partners shown as insured <input type="checkbox"/> Have <input type="checkbox"/> Have not elected to be covered as employees under this policy. †† Products-Completed Operations aggregate is equal to each occurrence limit and is included in policy aggregate.				
CERTIFICATE HOLDER'S NAME AND ADDRESS			CANCELLATION	
• Nasco 907 Janesville Ave Fort Atkinson, WI 53538			<input type="checkbox"/> Should any of the above described policies be cancelled before the expiration date thereof, the company will endeavor to mail *(    days) written notice to the Certificate Holder named, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. *10 days unless different number of days shown. <input checked="" type="checkbox"/> This certifies coverage on the date of issue only. The above described policies are subject to cancellation in conformity with their terms and by the laws of the state of issue.	
			DATE ISSUED	AUTHORIZED REPRESENTATIVE
			2/12/2009	Jeffrey Mayhew