



### Certificate of Insurance

This certifies that

- State Farm Fire and Casualty Company, Bloomington, Illinois
- State Farm General Insurance Company, Bloomington, Illinois
- State Farm Fire and Casualty Company, Aurora, Ontario
- State Farm Florida Insurance Company, Winter Haven, Florida
- State Farm Lloyds, Dallas, Texas

insures the following policyholder for the coverages indicated below:

Policyholder **SANTY, RANDY DBA RANDY'S PLUMBING SERVICE**

Address of policyholder **PO Box 365, Lowell, IN 46356**

Location of operations **111 Halstead St., Lowell, IN 46356**

Description of operations **Plumbing**

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in the policies is subject to all the terms, exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

Policy Number	Type of Insurance	Policy Period		Limits of Liability (at beginning of policy period)
		Effective Date	Expiration Date	
94-FD-9028-2	Comprehensive Business Liability	01/22/2012	01/22/2013	BODILY INJURY AND PROPERTY DAMAGE
This insurance includes:				
<input checked="" type="checkbox"/> Products - Completed Operations				Each Occurrence 1,000,000.00
<input checked="" type="checkbox"/> Contractual Liability				General Aggregate 2,000,000.00
<input type="checkbox"/> Personal Injury				Product - Completed Operations Aggregate 2,000,000.00
<input type="checkbox"/> Advertising Injury				
Policy Number	EXCESS LIABILITY	Policy Period		BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit)
	<input type="checkbox"/> Umbrella	Effective Date	Expiration Date	Each Occurrence
	<input type="checkbox"/> Other			Aggregate
Policy Number	Type of Insurance	Policy Period		Part I - Workers Compensation - Statutory
		Effective Date	Expiration Date	Part II - Employers Liability
94-FD-9577-6	Workers' Compensation and Employers Liability	01/22/2012	01/22/2013	Each Accident \$ 100,000.00
				Disease - Each Employee \$ 100,000.00
				Disease - Policy Limit \$ 100,000.00
Policy Number	Type of Insurance	Policy Period		Limits of Liability (at beginning of policy period)
94-00-0215-6F	Surety Bond	12/31/2011	12/31/2012	\$5000

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

Name and Address of Certification Holder

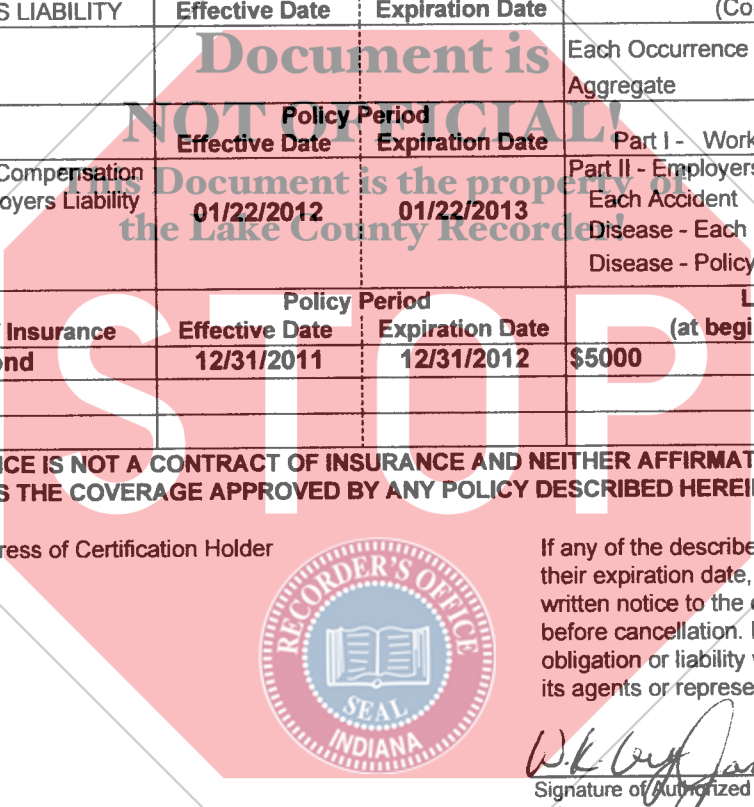


If any of the described policies are canceled before their expiration date, State Farm® will try to mail a written notice to the certificate holder days before cancellation. If we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

*W.K. by Jane Jones, LSA4/12*  
 Signature of Authorized Representative  
**LSA4** Title **12/2/2011** Date  
**Wayne Klinkhamer** Agent Name  
 Telephone Number **(219) 696-6607**

Agent's Code State **W. Klinkhamer** **14-2613**  
 Agent Code **Fire 14**  
 AFO Code **AFO Southlake** **F600** 08-25-2009

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