

ACORD**CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YY)
6/9/2009

JOHNSTON, MEIER INSURANCE BROKERS INC.
 101 - 19978 - 72 Ave
 Langley, BC V2Y 1R7
 TEL: 1-604-533-0333 or 1-888-564-7687
 FAX: 1-604-533-7004 EMAIL: langley@jmins.com

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 BELOW.

COMPANIES AFFORDING COVERAGE

INSURED:
Ameri - Can Logistics Ltd.
 32146 King Road
 Abbotsford, BC
 V2T 5Z5

COMPANY
A Insurance Corp of British Columbia
 COMPANY
B ING INSURANCE COMPANY OF CANADA
 COMPANY

COVERAGES

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS **All policy limits are in Canadian Funds**	
B	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTORS PROT <input type="checkbox"/>	5V1163962	06/12/2009	06/12/2010	GENERAL AGGREGATE	\$ 2,000,000
	PRODUCTS - COM/OP AGG				\$	
	PERSONAL & ADV INJURY				\$	
	EACH OCCURRENCE				\$ 2,000,000	
	FIRE DAMAGE (Any one fire)				\$	
	MED EXP (Any one person)				\$	
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/>	5077KD	04/27/2009	04/26/2010	COMBINED SINGLE LIMIT	\$ 2,000,000
	BODILY INJURY (Per person)				\$	
	BODILY INJURY (Per accident)				\$	
	PROPERTY DAMAGE				\$	
B	OTHER LIABILITY <input checked="" type="checkbox"/> MOTOR TRUCK CARGO <input checked="" type="checkbox"/> INCL. REEFER BREAKDOWN <input checked="" type="checkbox"/> NON-OWNED TRAILERS	5V1163962	06/12/2009	06/12/2010	"BROAD FORM" DED. \$2500	\$ 150,000
	REEFER DED \$5000					
	TRAILER INTERCHANGE PHYS DAMAGE DED\$5000				\$ 60,000	
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA LIABILITY <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE	\$
	AGGREGATE				\$	
					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE <input type="checkbox"/> INCL OFFICERS ARE: <input type="checkbox"/> EXCL		Coverage is continuous as per B.C. Government statute regulation. To obtain a Clearance Letter please visit: www.worksafebc.com		<input type="checkbox"/> WC STATU- <input type="checkbox"/> OTHER TORY LIMITS	
	EL EACH ACCIDENT					
	EL DISEASE - POLICY LIMIT					
	EL DISEASE - EA EMPLOYEE					
OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS: General Truckman - hauling for others.

CERTIFICATE HOLDER

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 15 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 Johnston, Meier Insurance Brokers Inc
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