

# Oregon Workers' Compensation Certificate of Insurance

**Certificate holder:**

COLUMBIA DRYWALL SYSTEMS INC  
14940 SE 82ND DR  
CLACKAMAS, OR 97015

The policy of insurance listed below has been issued to the insured named below for the policy period indicated. The insurance afforded by this policy is subject to all the terms, exclusions and conditions of such policy; this policy is subject to change or cancellation at any time.

<b>Insured</b> Columbia Drywall Systems Inc PO Box 2937 Clackamas, Or 97015-2937	<b>Producer/contact</b> SAIF Corporation Nan F Angelo 503.673.5403 nanang@saif.com
<b>Issued</b> 06/21/2022 <b>Policy</b> 851229 <b>Period</b> 07/01/2022 to 07/01/2023	<b>Limits of liability</b> Bodily Injury by Accident \$1,000,000 each accident Bodily Injury by Disease \$1,000,000 each employee Body Injury by Disease \$1,000,000 policy limit

**Description of operations/locations/special items**

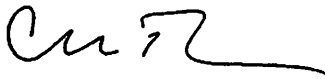
**Important**

This certificate is issued as a matter of information only and confers no rights to the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies above. This certificate does not constitute a contract between the issuing insurer, authorized representative or producer and the certificate holder.

**CANCELLATION:**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED TO THE POLICYHOLDER AND CERTIFICATE HOLDER IN ACCORDANCE WITH THE POLICY PROVISIONS AND OREGON LAW. SAIF WILL ENDEAVOR TO PROVIDE WRITTEN NOTICE WITHIN 30 DAYS WHENEVER POSSIBLE.

Authorized representative



Chip Terhune  
President and CEO