

## Oregon Workers' Compensation Certificate of Insurance

**Mail to:**

SUNRIVER QUALITY PAINTING INC  
TIGHTLINE QUALITY PAINTING  
PO BOX 468  
LA PINE, OR 97739-0468

**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.**

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<b>Insured</b> Sunriver Quality Painting Inc Tightline Quality Painting PO Box 468 La Pine, Or 97739-0468	<b>Producer/contact</b> SAIF Corporation Portland Service Center 503.673.5283 servic@saif.com
<b>Issued</b> 02/07/2020 <b>Policy</b> 858741 <b>Period</b> 04/01/2019 to 04/01/2020	<b>Limits of liability</b> Bodily Injury by Accident \$500,000 each accident Bodily Injury by Disease \$500,000 each employee Body Injury by Disease \$500,000 policy limit

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**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.

Authorized representative



Kerry Barnett  
President and CEO