

**DIVINE LIFE CHURCH
225 E CANO ST
PO BOX 4116
EDINBURG, TX 78539
Phone(956)720-0222
Fax(866)278-8110
Email: dlc@divine-life-church.org**

September 08, 2009

Mr. Balde Guerra
Commissioners Court
Hidalgo County
2818 S. Business Hwy.281
Edinburg, TX 78539

Dear Mr. Balde Guerra:

Please allow us to introduce ourselves. We are Divine Life Church located at 225 E. Cano St Edinburg, Texas. We are a church after God's heart seeking to meet the needs of people. At this time we are preparing for our Fall Youth Camp, which will be in the month of November.


This is a time for us to send our youth to Discovery Camp, a safe, fun and exciting camp where the lives of our teenagers will be changed. To help send them we are having a BBQ Fundraiser on 10/24/2009 where these proceeds will go towards the expenses to help send our youth to this camp and also for other upcoming events. Your support can help make this event a great success.

At this time we are providing you written request asking you if you would allow us to use the parking lot on the east side of the court house to hold our fundraiser event.

Together we can make a difference in the lives of the people in our community. Thank you in advance for your generous support and May God bless you for it.

If you have any questions or need additional information, please feel free to contact me at (956)429-9176 or Leonor B. Gutierrez, event coordinator at (956)460-5589.

Sincerely,



Pastor Robert Alafa
Divine Life Church

RA/lbg

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/01/2009

PRODUCER 956.686.3888 FAX 956.682.5650
Shepard Insurance Agency
 P O Box 4288
 5801 N 10th #300
 McAllen, TX 78502

INSURED **Divine Life Church**
 P O Box 4116
 Edinburg, TX 78540

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.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Halifax Financial Services	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS		
44PB461660	09/25/2009	09/25/2010	GENERAL LIABILITY	EACH OCCURRENCE \$ 500,000	
			<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000	
			<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	MED EXP (Any one person) \$ 5,000	
			<input checked="" type="checkbox"/> Pastoral Liability	PERSONAL & ADV INJURY \$ 500,000	
			GENL AGGREGATE LIMIT APPLIES PER:		GENERAL AGGREGATE \$ 1,000,000
			<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	PRODUCTS - COMPROP AGG \$ 1,000,000	
			AUTOMOBILE LIABILITY		COMBINED SINGLE LIMIT (Ea accident) \$
ANY AUTO		BODILY INJURY (Per person) \$			
ALL OWNED AUTOS		BODILY INJURY (Per accident) \$			
SCHEDULED AUTOS		PROPERTY DAMAGE (Per accident) \$			
HIRED AUTOS		AUTO ONLY - EA ACCIDENT \$			
NON-OWNED AUTOS		OTHER THAN AUTO ONLY: EA ACC \$			
GARAGE LIABILITY		AGG \$			
<input type="checkbox"/> ANY AUTO		EACH OCCURRENCE \$			
EXCESS / UMBRELLA LIABILITY		AGGREGATE \$			
<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE		\$			
<input type="checkbox"/> DEDUCTIBLE		\$			
RETENTION \$		\$			
WORKERS COMPENSATION AND EMPLOYERS LIABILITY		WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/EMBER EXCLUDED? (Mandatory in MN)		E.L. EACH ACCIDENT \$			
If yes, describe under SPECIAL PROVISIONS below		E.L. DISEASE - EA EMPLOYEE \$			
OTHER		E.L. DISEASE - POLICY LIMIT \$			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER Insured Copy ACORD 25 (2009/01)	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Kent Shepard/PL04
	BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.



FAX

**DIVINE LIFE CHURCH
225 E. CANO
EDINBURG, TX 78539
PH#956-720-0222
FAX# 866-278-8110**

To: Monica Badillo

Fax number: (956) 292-7034

From: Leonor Gutierrez / Event Coordinator

Phone number: (956) 460-5589

Date: 10/02/2009

Regarding: BBQ Fundraiser

Number of pages: 03 (including this page)

**I am refaxing the request fro the parking lot at the court house
along with the insurance binder you were requesting. Please let me
know if additional information is needed.**

Thank you so much for your generous support in this great event.