

Nadeer Construction Corp
 2219 Oakland ave S. suite 210
 Minneapolis, MN 55404

Invoice

Date: 05/22/2019
 Invoice No.: [Draft]
 Due Date: 11/18/2019
 Customer PO No.: lb llc

Bill To:
Libin LLC
 957 prosperity ave
 St,paul mn 55106

Qty	Description	Unit Price	Discount	Total
1	Demolition	\$9,275.00		\$9,275.00
1	Framing all walls	\$12,650.00		\$12,650.00
1	Sheetrock ,mud,Tape	\$17,950.00		\$17,950.00
2	paint	\$15,100.00		\$30,200.00
1	Plumbing water line , fixtures , water heater	\$19,200.00		\$19,200.00
1	electric , wiring ,Light Fixtures	\$14,910.00		\$14,910.00
1	doors, window and harwere	\$9,750.00		\$9,750.00
1	bathroom fixers	\$5,550.00		\$5,550.00
1	roof and trus and pywood	\$14,500.00		\$14,500.00
1	siding	\$12,680.00		\$12,680.00
1	HVAC heating & cooling	\$35,500.00		\$35,500.00
1	extrior framing and sheathing	\$7,200.00		\$7,200.00
1	fire alarm system carbon & smoke	\$550.00		\$550.00
1	sprinkler system service	\$3,500.00		\$3,500.00
1	Floor Trusses Repair	\$5,000.00		\$5,000.00
1	Supervisor, insurance and Overhead fee	\$25,000.00		\$25,000.00
1	Pemit Fee	\$2,000.00		\$2,000.00
			Subtotal	\$225,415.00
			Total	\$225,415.00
			Balance Due	\$225,415.00

Make all checks payable to Nadeer Construction Corp
 Total due in 21 days Overdue Accounts subject to a service charge of 10% per month.

Thank you for your business.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/23/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Kraft Lake 620 SOUTHVIEW BLVD SOUTH ST. PAUL MN 55075 INSURED Hibag Yusuf, DBA: Nadeer Construction Corp 3465 Kentucky Court N Brooklyn Park MN 55445	CONTACT NAME: Gino Ward PHONE (A/C, H/S, F/X): 6514500863 FAX (A/C, H/S): 6512035755 E-MAIL: gward1@farmersagent.com ADDRESS: gward1@farmersagent.com INSURER(S) AFFORDING COVERAGE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>INSURER A</th> <th>NAIC #</th> </tr> <tr> <td>Security National Insurance Company</td> <td>19879</td> </tr> <tr> <td>INSURER B: Farmers Insurance Exchange</td> <td>21652</td> </tr> <tr> <td>INSURER C: SPM</td> <td>12366</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER A	NAIC #	Security National Insurance Company	19879	INSURER B: Farmers Insurance Exchange	21652	INSURER C: SPM	12366	INSURER D:		INSURER E:		INSURER F:	
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INSURER F:															

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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.

INSR. LTR.	TYPE OF INSURANCE	ADDL. SUBR. INSD. Y/W/P	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL. AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		NAT10165904	02/10/2019	02/10/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea-occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 1,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		606289171	02/25/2019	02/25/2020	COMBINED SINGLE LIMIT (Ea-accident) \$ 50,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	UMBRELLA LIAB. <input type="checkbox"/> OCCUR EXCESS LIAB. <input type="checkbox"/> CLAIMS-MADE DED. RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	03/13/2019	03/13/2020	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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