CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

							4/2015
THIS CERTIFICATE IS ISSUED AS A CERTIFICATE DOES NOT AFFIRMAT BELOW. THIS CERTIFICATE OF INS REPRESENTATIVE OF PRODUCER A	URANCI	OR NEGATIVELY AMEND, E DOES NOT CONSTITUT	EXTEND OR ALT	ER THE CO	VERAGE AFFORDED	BY THE	
REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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			CONTACT Kather	ine Berkm	an		
Calender-Robinson Company, I	nc.		NAME: FAX PHONE (415) 978-3800 (A/C, No, Ext): (415) 978-3825				
FB0267063	E-MAIL ADDRESS: kberkman@calrob.com						
300 Montgomery St., Suite 88			INSURER(S) AFFORDING COVERAGE				NAIC #
	rancisco CA 94104			INSURER A :Nonprofits' Insurance Alliance			
INSURED Via Center			INSURER B :				
2126 Sixth Street				INSURER C :			
LILO DIRCH DURGE			INSURER D :				
Berkeley CA 94	710		INSURER E :				
		E NUMBER:CL1512141	<u>INSURER F :</u> 4667		REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES	OF INSU	JRANCE LISTED BELOW HAV	VE BEEN ISSUED TO	THE INSURE	D NAMED ABOVE FOR T	HE POLIC	Y PERIOD
CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PERTAIN POLICIES	ENT, TERM OR CONDITION , THE INSURANCE AFFORDI S. LIMITS SHOWN MAY HAVE	OF ANY CONTRACT ED BY THE POLICIE BEEN REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS	DOCUMENT WITH RESPE	CT TO MA	
INSR LTR TYPE OF INSURANCE	ADDL SUB	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	тѕ	
X COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000
A CLAIMS-MADE X OCCUR		0015 10000			PREMISES (Ea occurrence)	\$	50,000
x Incl. Professional Lia		2015-10322-NPO	12/31/2015	12/31/2016	MED EXP (Any one person)	\$	20,000
x @ \$ 1,000,000/\$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY	-	1,000,000
X POLICY PRO- JECT LOC					GENERAL AGGREGATE		2,000,000 2,000,000
OTHER:					PRODUCTS - COMP/OP AGG	\$	2,000,000
AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)		1,000,000
A ANY AUTO					BODILY INJURY (Per person)	\$	
ALL OWNED SCHEDULED AUTOS AUTOS		2015-10322-NPO	12/31/2015	12/31/2016	BODILY INJURY (Per accident)) \$	
X HIRED AUTOS X NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$	
						\$	
X UMBRELLA LIAB X OCCUR		0015 10000			EACH OCCURRENCE	\$	2,000,000
A CLAIMS-MADE		2015-10322-UMB-NPO	4/14/2016	12/31/2016	AGGREGATE		2,000,000
DED X RETENTION \$ 10,000 WORKERS COMPENSATION					PER OTH-	\$	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE					STATUTE ER		
OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A				E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYE	\$	
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT		
A Sexual Misconduct Liability		2015-10322-NPO	12/31/2015	12/31/2016			1,000,000
-					Aggrregate		2,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC Mt. Diablo Unified School Di respect to liability arising	strict	is included as add	litional insur	ed as per	the attached en	dorseme	ent with
CERTIFICATE HOLDER			CANOFILIATION				
CERTIFICATE HOLDER			CANCELLATION				
Mt. Diablo Unified School District 1936 Carlotta Avenue Concord, CA 94519							
		Ċ	AUTHORIZED REPRESE	ine	Berlen		
			V © 19	88-2014 AC	ORD CORPORATION.	All rights	s reserved.

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Named Insured: Via Center

Policy: 2015-10322-NPO

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy, and for which a certificate of insurance naming such person or organization as additional insured has been issued, but only with respect to their liability arising out of their requirements for certain performance placed upon you, as a nonprofit organization, in consideration for funding or financial contributions you receive from them. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

A. In the performance of your on-going operations; or

B. In connection with your premises owned by or rented to you

THE INSURANCE provided under this endorsement is primary & noncontributory to any other valid & collectible insurance carried by the additional insured entity and this insurance will apply separately to each insured against whom a claim is made or a suit is brought.

CG 2026 (07/04)



A Head for Insurance. A Heart for Nonprofits.

NONPROFITS INSURANCE ALLIANCE **OF CALIFORNIA (NIAC)**

www.insurancefornonprofits.org

POLICY CHANGE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

COMPANY: Nonprofits Insurance Alliance of California

POLICY NUMBER: 2016-10322-UMB-NPO

NAMED INSURED: **VIA** Center

POLICY CHANGE EFFECTIVE: 04/25/2016

COVERAGE PART AFFECTED: COMMERCIAL UMBRELLA

POLICY CHANGE #: 1

In consideration of an additional premium, this policy is hereby amended as follows:

it is hereby agreed that form NIAC-UMB-NPO/2-99, item 3, is amended to read: \$1,321

Item 4, LIMITS OF INSURANCE

a.	Each Occurrence (other than Directors' & Officers' Liability and Improper Sexual Conduct Liability)	\$2,000,000
	Each Wrongful Act - Directors' & Officers' Liability	Excluded
	Each Occurrence - Improper Sexual Conduct Liability	\$2,000,000
b.	Products Completed Operations Aggregate [(where applicable)]	\$2,000,000
C.	General Aggregate	\$2,000,000
d.	Aggregate Directors' & Officers' Liability	Excluded
e.	Aggregate Improper Sexual Conduct Liability	\$2,000,000
f.	Retained Limit	\$10,000

All other terms, limits and conditions remain the same.

ADDITIONAL PREMIUM:	\$582

RETURN PREMIUM:

\$0

TOTAL PREMIUM: \$582

Pamel C. R.

AUTHORIZED SIGNATURE

04/26/2016

(00666)