

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/06/2021

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 WestCorp Financial & Insurance Services PHONE (A/C, No, Ext): 916-985-0288 110 Blue Ravine Rd, Ste 158 FAX (A/C, No): 916-985-0289 Folsom CA 95630 ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Sequoia Insurance Company INSURER B : CNA - Continental Casualty Company Comm Across Barriers Therapy Clinics Inc DBA Speech at Home INSURED 20443 1849 Willow Pass Rd, #420 Concord CA 94520 INSURER C : INSURER D : INSURER E 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. ADDL SUBR TYPE OF INSURANCE INSD WVD POLICY NUMBER s 2,000,000 COMMERCIAL GENERAL LIABILITY 1 V **EACH OCCURRENCE** DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE s 1,000,000 B 7012767397 s 10,000 06/01/2021 06/01/2022 MED EXP (Any one person) s 2,000,000 PERSONAL & ADV INJURY s 4,000,000 GEN'L AGGREGATE LIMIT APPLIES PER GENERAL AGGREGATE s 4,000,000 POLICY PRODUCTS - COMP/OP AGG OTHER: COMBINED SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** \$ ANY AUTO S BODILY INJURY (Per person) OWNED SCHEDULED BODILY INJURY (Per accident) AUTOS ONLY HIRED AUTOS ONLY AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) S **AUTOS ONLY** \$ UMBRELLA LIAB **OCCUR EACH OCCURRENCE** S **EXCESS LIAB** CLAIMS-MADE AGGREGATE \$ DED RETENTION S WORKERS COMPENSATION PER AND EMPLOYERS' LIABILITY QWC1153794 06/01/2021 06/01/2022 s 1,000,000 ANYPROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT Y R/MEMBER EXCLUDED? NIA E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below s 1,000,000 E.L. DISEASE - POLICY LIMIT Loc 1 - 25,000 Loc 2 - 5,000 B 7012767397 **Business Personal Property** 06/01/2021 06/01/2022 Loc 3 - 5,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Romarks Schedule, may be attached if more space is required)
Locations include: 2213 Buchanan Road #109, Antioch, CA 94509 and 320 Fairview Ave, Brentwood, CA 94513 CERTIFICATE HOLDER CANCELLATION Mt. Diablo Unified School District SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE Special Education Department THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN 1936 Carlotta Dr. ACCORDANCE WITH THE POLICY PROVISIONS. Concord. CA. 94519-1397 AUTHORIZED REPRESENTATIVE 05/06/2021

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110 Blue Ravine Rd, Ste 158

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COVERA THIS IS INDICAT CERTIFI EXCLUS INSR	Comm Across Barriers Therap 1849 Willow Pass Rd, #420 Concord CA 94520 AGES CEF TO CERTIFY THAT THE POLICIES FED. NOTWITHSTANDING ANY R ICATE MAY BE ISSUED OR MAY BIONS AND CONDITIONS OF SUCH TYPE OF INSURANCE COMMERCIAL GENERAL LIABILITY	RTIFI S OF EQUI PER' POL	CAT INSU REME	E NUMBER:	INSURER A : Sequo INSURER B : CNA - INSURER C : INSURER D : INSURER E : INSURER F :	ia Insuranc	Casualty Company	NAIC# 20443
COVERA THIS IS INDICAT CERTIFI EXCLUS INSR LTR	AGES CEF TO CERTIFY THAT THE POLICIES TED. NOTWITHSTANDING ANY R ICATE MAY BE ISSUED OR MAY SIONS AND CONDITIONS OF SUCH TYPE OF INSURANCE	RTIFI S OF EQUI PER' POL	CAT INSU REME	E NUMBER:	INSURER C: INSURER D: INSURER E: INSURER F:	Continental		20443
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V 0	COMMERCIAL GENERAL LIABILITY		SUBF		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs
	CLAIMS-MADE OCCUR	V	V	7012767397	06/01/2021	06/01/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person)	s 1,000,000 s 10,000
			Î				PERSONAL & ADV INJURY	s 2,000,000
GENT.	AGGREGATE LIMIT APPLIES PER:		1					s 4,000,000
	POLICY PRO- LOC						GENERAL AGGREGATE	s 4,000,000
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	OTHER: MOBILE LIABILITY	-	h				COMBINED SINGLE LIMIT	\$
	NY AUTO		لسإا				(Ea accident)	S
	OWNED SCHEDULED				j		BODILY INJURY (Per person)	S
L A	AUTOS ONLY AUTOS NON-OWNED				1		BODILY INJURY (Per accident)	S
L A	AUTOS ONLY AUTOS ONLY			2			PROPERTY DAMAGE (Per accident)	S
		<u> </u>	1					\$
L u	MBRELLA LIAB OCCUR						EACH OCCURRENCE	S
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DI	ED RETENTIONS							S
	ERS COMPENSATION		V				PER OTH-	
	MPLOYERS' LIABILITY OPRIETOR/PARTNER/EXECUTIVE		-	QWC1153794	06/01/2021	06/01/2022	E.L. EACH ACCIDENT	s 1,000,000
OFFICE	R/MEMBEREXCLUDED?	N/A	1/A				The second secon	4 000 000
If yes, de	lescribe under							s 1,000,000
DESCRI	IPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT Loc 1 - 25,000	\$ 1,000,000
3 Busine	ess Personal Property			7012767397	06/01/2021	06/01/2022	Loc 2 - 5,000 Loc 3 - 5,000	
	OF OPERATIONS / LOCATIONS / VEHICL	Ш						

05/06/2021

Antioch, CA. 94509

2213 Buchanan Road #109

AUTHORIZED REPRESENTATIVE

то

ANNA MARIE KRAJCIN 4284 DUBHE CT CONCORD, CA, 94521-1820 TO BE COMPLETED WHEN THIS ENDORSEMENT IS ISSUED

ATTACHES TO AND FORMS A PART OF POLICY NUMBER

CAAS200613465

ENDORSEMENT EFFECTIVE DATE

04-29-2021

POLICY EXPIRATION

03-19-2022

NAMED INSURED ANNA MARIE KRAJCIN

The Policy identified above is changed only as follows:

The following person or organization:

Name: MOUNT DIABLO UNIFIED SCHOOL DISTRICT AND THE BOARD OF EDUCATION

Address: 1936 CARLOTTA DR

CONCORD, CA 94519

Will be considered an insured person, under and subject to the terms and conditions specified in Item 2 below.

- For an additional premium, subpart (3) of the section entitled "ADDITIONAL DEFINITION USED IN THIS PART ONLY", under PART I – LIABILITY, COVERAGE A – LIABILITY COVERAGE, on page 4 of the Policy, is added to the Policy:
 - (3) any other person or organization with respect only to legal liability for acts or omissions of:
 - (a) any person covered under this Part while using your insured car, or
 - (b) you or any relative covered under this Part while using any car or utility trailer other than your insured car if the car or utility trailer is not owned or hired by that person or organization.
- 3. Prior to cancellation of this policy, **we** will give to the person or organization shown above 10 days' notice of cancellation for non-payment of premium, 20 days' notice of cancellation for any other reason or lapse of the Policy.
- 4. Terms in bold text are defined in the Policy. All other terms, conditions and exclusions of the Policy remain unchanged.

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ANNA M KRAJCIN 4284 DUBHE CT CONCORD,CA 94521

NAMED INSURED ANNA M KRAJCIN **ALEN KRAJCIN**

The Policy identified above is changed only as follows:

The following person or organization:

Name:

SPEECH AT HOME

Address: 4284 DUBHE CT CONCORD, CA

94521

Will be considered an insured person, under and subject to the terms and conditions specified in Item 2 below.

- For an additional premium, subpart (3) of the section entitled "ADDITIONAL DEFINITION USED IN THIS PART ONLY", under PART I - LIABILITY, COVERAGE A - LIABILITY COVERAGE, on page 4 of the Policy, is added to the Policy:
 - (3) any other person or organization with respect only to legal liability for acts or omissions of:
 - (a) any person covered under this Part while using your insured car, or
 - (b) you or any relative covered under this Part while using any car or utility trailer other than your insured car if the car or utility trailer is not owned or hired by that person or organization.
- 3. Prior to cancellation of this policy, we will give to the person or organization shown above 10 days' notice of cancellation for nonpayment of premium, 20 days' notice of cancellation for any other reason or lapse of the Policy.
- 4. Terms in bold text are defined in the Policy. All other terms, conditions and exclusions of the Policy remain unchanged.

TO BE COMPLETED WHEN THIS **ENDORSEMENT IS ISSUED**

ATTACHES TO AND FORMS A PART OF POLICY NUMBER

CAAS200613465

ENDORSEMENT EFFECTIVE DATE

03-19-2021

POLICY EXPIRATION

03-19-2022



Mercer Consumer, a service of Mercer Health & Benefits Administration LLC P.O. Box 14576

Des Moines IA 50306-3576 Phone: 1-800-375-2764 Fax: 212-948-1509

04/28/2021

Speech at Home Suite 420 1849 Willow Pass Rd Concord, CA 94520

Re: Professional Liability Insurance - Endorsement

Client#: 2836818

Policy#: AHY-993419002

Dear Anna Krajcin:

We have enclosed an endorsement reflecting an address change to your policy. Please place the endorsement with the original policy.

If you have questions or need assistance, contact our office at 1-800-375-2764.

Sincerely,

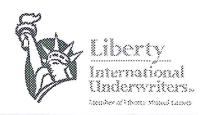
Mark Brostowitz

Principal

Mercer Consumer, a service of

Mercer Health & Benefits Administration LLC

CA License #0G39709, In CA d/b/a Mercer Health & Benefits Insurance Services LLC



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

ENDORSEMENT NO.

Effective Date:	April 28, 2021	
Policy Number:	AHY-993419002	
Issued To:	Speech at Home	
Return Premium Additional Premium	\$0.00	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CHANGE ENDORSEMENT

Item 2 of the Declarations is deleted in its entirety and replaced by:

Mailing Address:

Suite 420

1849 Willow Pass Rd Concord, CA 94520

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

1 HCPL-8006 (Ed. 11/09)



HCPL-2037D (11/09)

LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")
55 Water Street, 18th Floor
New York, NY 10041

DECLARATIONS

Policy 1	Number: AHY-993419002	Renewal Of:	AHY-9934190	001
SECTION	ON I			
Item				AFA
1.	Named Insured: Speech at Hon	ne		-
2.	Mailing Address: 4284 Dubhe Concord, CA			
3.	Policy Period:	From: 03/09/2021 12:01 A. M. Standard Time At		3/09/2022 esignated Premises
4.	Business or Profession: Speech Language Pathologist	Affiliation:	-	
5.	The Named Insured is a(n):	Partnership Corporation Sole Proprietor (with employees)	Individual Professional	LLC Association Other
and agre HCPL-80 OFAC (0	eements contained in the following 20 (Ed. 12/10), HCPL-2037-9000 CA (18/09),		gether with the (01/14), HCPL-203	provisions, stipulations 8 (11/09), HCPL-8101A (04/1
HCPL-83	20 (01/15), HCPL-8321 (01/15), HCPL-832	4 (01/15), HCPL-8328 (02/15)		
SECTIO				
Item	COVERAGE			Premium
A. B.	Professional Liability General Liability Terrorism Risk Insura	[X] []		\$166.00
C.	Endorsements	[]		
			TOTAL:	\$300.00 Minimum Premium
	#1 000 000	LIMITS OF LIABILITY	42.000	200
	\$1,000,000	Each Incident and Each Occurrence	\$3,000.	,000 Aggregate
SECTIO	ON III SUPPLEMENTARY PAYMENTS	5		
4 .	First Party Assault			
3.	Licensing Board Reimbur	rsement		
J.	Wage Loss and Expense			
О.	Deposition Expense			
Ξ.	First Aid Reimbursement			
Represer	Mercer Healt	umer, a service of h & Benefits Administration LLC		
	P.O. Box 145			
1 1	3153- Americ	can Speech-Language-Hearing Assoc. Des M	Ioines, IA 50306	-3576



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

COVERED OCCUPATIONS ENDORSEMENT

The business, occupation and/or profession shown in the Declarations of this policy is amended to include the following:

Speech Language Pathologist, FT, Owner, 1

Speech Language Pathologist Aide/Assistant, Employee(s), 1

MEMORANDUM OF IN	SURANCE		Date Issued 02/24/2021					
Producer Mercer Consumer, a service Mercer Health & Benefits A P.O. Box 14576 Des Moines, IA 50306-3576 1-800-375-2764	dministration LLC	This memorandum is issued as a matter of information only and confers no rights upon the holder. This memorandum does not amend, extend or alter—the coverages afforded by the Certificate listed below. Company Affording Coverage						
Insured			Liberty Insurance Underwriters Inc.					
Speech at Home 4284 Dubhe Court Concord, CA 94521								
This is to certify that the Ce withstanding any requirement issued or may pertain, the insusuch Certificate. The limits should be morandum of Insurancis successfully paid in full.	, term or condition of any mance afforded by the Cen own may have been reduce	y contract or other of tificate described he ed by paid claims.	document with respect erein is subject to all the	to which this memore terms, exclusions ar	randum may be nd conditions of			
Type of Insurance	Certificate Number	Effective Date	Expiration Date	Limi	ts			
Professional Liability SpeechLangH Fm Speech Language Pathologis Behavioral Therapist	AHY-993419002	03/09/2021	03/09/2022	Per Incident/ Occurrence Annual Aggregate	\$1,000,000 \$3,000,000			
				36 - 6	, , , , , , , , , , , , , , , , , , , ,			
PROOF OF INSURANCE			,					
Memorandum Holder:			Should the above of					
PROOF OF COVERAGE	before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.							
	Authorized Representative Mark Brostowitz							
			manha.	Brostowy				
			4	i i	¥			

Mercer Consumer, a service of Mercer Health & Benefits Administration LLC P.O. Box 14576 1.800.375-2764 Insured Speech at Home 4284 Dubhe Court Concord, CA 94521 This is to certify that the Certificate listed below has been issued to the insured named above for the policy period indicated, n withstanding any requirement, term or condition of any contract or other document with respect to which this memorandum may tissued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions as successfully paid in full. Type of Insurance Certificate Number Effective Date Professional Liability Speech Language Pathologist Behavioral Therapist Annual Aggregate Should the above describe Certificate be cancell before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to t Memorandum Holder: PROOF OF COVERAGE ONLY Speech Language Pathologist is/are covered under the provisions of the policy. Should the above describe Certificate be cancell before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to t Memorandum Holder manded to the left, but failure mail such notice shall impose no obligation or liabili of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	MEMORANDUM OF IN	SURANCE	Date Issued 02/24/2021						
Speech at Home 4284 Dubhe Court Concord, CA 94521 This is to certify that the Certificate listed below has been issued to the insured named above for the policy period indicated, n withstanding any requirement, term or condition of any contract or other document with respect to which this memorandum may to issued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions such Certificate. The limits shown may have been reduced by paid claims. The Memorandum of Insurance and verification of payment are your evidence of coverage. No coverage is afforded unless the premium is successfully paid in full. Type of Insurance Certificate Number Effective Date Expiration Date Limits Professional Liability Speech Language Pathologist Behavioral Therapist AHY-993419002 03/09/2021 03/09/2022 Per Incident/ Occurrence Annual Aggregate \$3,000,000 Memorandum Holder: Should the above describe Certificate be cancell before the expiration date thereof, the issuing companyill endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	Mercer Consumer, a service Mercer Health & Benefits Ad P.O. Box 14576 Des Moines, IA 50306-3576	dministration LLC		Company Affording Coverage					
Annual Aggregate Annual Aggregate Annual Aggregate Annual Aggregate Should the above describe Certificate be cancell before the expiration date thereof, the issuing company its agents representatives. Authorized Representative Authorized Representative Methors or many Earling that the Certificate listed below has been issued to the insured named above for the policy period indicated, no withstanding any requirement, term or condition of any contract or other document with respect to which this memorandum may tissued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions is successfully paid in full. Type of Insurance and verification of payment are your evidence of coverage. No coverage is afforded unless the premium is successfully paid in full. Type of Insurance Certificate Number Effective Date Expiration Date Limits Per Incident/ Occurrence \$1,000,000 Annual Aggregate \$3,000,000 Should the above describe Certificate be cancell before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	Insured			Liberty Insurance Underwriters Inc.					
issued or may pertain, the insurance afforded by the Certificate described herein is subject to all the terms, exclusions and conditions such Certificate. The limits shown may have been reduced by paid claims. The Memorandum of Insurance and verification of payment are your evidence of coverage. No coverage is afforded unless the premium is successfully paid in full. Type of Insurance Certificate Number Effective Date Expiration Date Limits Professional Liability Speech Language Pathologist Behavioral Therapist AHY-993419002 Annual Aggregate Sa,000,000 Annual Aggregate Sa,000,000 Memorandum Holder: PROOF OF COVERAGE ONLY Should the above describe Certificate be cancell before the expiration date thereof, the issuing companiely will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	4284 Dubhe Court								
Professional Liability Speech Language Pathologist Behavioral Therapist AHY-993419002 O3/09/2021 O3/09/2022 Per Incident/ Occurrence Annual Aggregate S3,000,000 Annual Aggregate S3,000,000 Annual Aggregate S3,000,000 Should the above describe Certificate be cancell before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	withstanding any requirement issued or may pertain, the insusuch Certificate. The limits should the Memorandum of Insurance	term or condition of any mance afforded by the Cer own may have been reduced	y contract or other or rtificate described he ed by paid claims.	document with respect rein is subject to all the	to which this memore terms, exclusions ar	randum may be ad conditions of			
Speech Language Pathologist Behavioral Therapist Annual Aggregate Sa,000,000 Anna Krajcin, Speech Language Pathologist is/are covered under the provisions of the policy. Memorandum Holder: PROOF OF COVERAGE ONLY Should the above describe Certificate be cancell before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	Type of Insurance	Certificate Number	Effective Date	Expiration Date	Limit	ts			
Anna Krajcin, Speech Language Pathologist is/are covered under the provisions of the policy. Memorandum Holder: PROOF OF COVERAGE ONLY Should the above describe Certificate be cancell before the expiration date thereof, the issuing comparable will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	SpeechLangH Fm Speech Language Pathologist	AHY-993419002	03/09/2021	03/09/2022	Occurrence				
Memorandum Holder: PROOF OF COVERAGE ONLY Should the above describe Certificate be cancell before the expiration date thereof, the issuing comparable will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz									
before the expiration date thereof, the issuing comparation will endeavor to mail 30 days written notice to the Memorandum Holder named to the left, but failure mail such notice shall impose no obligation or liability of any kind upon the company, its agents representatives. Authorized Representative Mark Brostowitz	Anna Krajcin, Speech Languaş	ge Pathologist is/are cover	ed under the provision	ons of the policy.	l				
Manha Brostony		LY		before the expiration will endeavor to ma Memorandum Holde mail such notice shal of any kind upon representatives. Authorized Represen Mark Brostow	date thereof, the issaid 30 days written r named to the left limpose no obligate the company, tative	suing company notice to the , but failure to ion or liability			



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY

THIS IS AN OCCURRENCE POLICY. PLEASE REVIEW THE POLICY CAREFULLY.

The Company agrees with the Named Insured, in consideration of the payment of the premium, and in reliance upon the statements in the Declarations and in the Application and subject to the Limit of Liability, exclusions, conditions and other terms of this policy, as follows:

I. COVERAGES

A. COVERAGE A, PROFESSIONAL LIABILITY COVERAGE

If indicated by a specific premium in the Declarations, the Company will pay on behalf of the Insured all sums which the Insured shall become legally obligated to pay as Damages because of Bodily Injury or Property Damage caused by an Incident or Personal and Advertising Injury offense, to which this insurance applies in the operation of the business or conduct of the profession of the Named Insured as specified in the Declarations; which occurs during the Policy Period.

B. COVERAGE B, GENERAL LIABILITY COVERAGE

If indicated by a specific premium in the Declarations, the Company will pay on behalf of the Insured all sums which the Insured shall become legally obligated to pay as Damages because of Bodily Injury, Property Damage or Personal and Advertising Injury to which this insurance applies in the operation of the business or conduct of the profession of the Named Insured as specified in the Declarations, caused by an Occurrence during the Policy Period. This coverage specifically includes the following extensions:

- 1. Contractual Liability: Bodily Injury or Property Damage resulting from any Incidental Contract relating to the operation of the Named Insured's business, except if such injury or damage occurred prior to the execution of the Incidental Contract;
- Host Liquor Liability: Bodily Injury or Property Damage arising out of the giving or serving of alcoholic beverages at functions incidental to the Named Insured's business;
- 3. Damage To Premises Rented To You: Property Damage to structures or portions thereof rented to or leased to the Named Insured, including fixtures permanently attached thereto, if such Property Damage arises out of fire. Solely as respects Damage To Premises Rented To You coverage, all of the exclusions of the policy, other than Exclusions 6, 12 and 13 and the Nuclear Energy Liability Exclusion (Broad Form) are deleted;

As respects coverage(s) provided by this insurance, the Company shall have the right and duty to defend any Suit against the Insured seeking Damages on account of such Bodily Injury, Property Damage, Personal and Advertising Injury, even if any of the allegations of the Suit are groundless, false or fraudulent, but the Company shall not be obligated to pay any claim or judgment or continue to defend any Suit after the applicable limit of the Company's liability has been exhausted by payment of Damages.

The Company, at its option, shall select and assign defense counsel; however, the Named Insured may engage additional counsel, solely at their expense, to associate in the defense of any claim covered hereunder. Claims Expenses incurred by the Company shall be paid in addition to the applicable Limits of Liability. The Company shall also have the right to investigate any claim and/or negotiate the settlement thereof, as it deems expedient, but the Company shall not commit to any settlement without the Named Insured's written consent. If the Named Insured refuses to consent to any settlement recommended in writing by the Company and elects to contest the claim or continue any legal proceedings in connection with such claim, then the Company shall be relieved of any





claim or continue any legal proceedings in connection with such claim, then the Company shall be relieved of any further duty to defend the claim, and the liability of the Company for **Damages** and **Claims Expenses** shall not exceed the amount for which the claim could have been settled as well as the **Claims Expenses** incurred by the Company or with the Company's consent up to the date of such refusal. The **Insured** shall not admit liability, nor assume any obligations, incur any costs, charges, or expenses or enter into any settlement without the Company's written consent.

II. PERSONS INSURED

Each of the following is an Insured under this policy to the extent set forth below:

- A. If the Named Insured is an individual, the Named Insured so designated in the Declarations;
- B. If the Named Insured is a sole proprietorship, the Named Insured so designated in the Declarations;
- C. If the Named Insured is a partnership, the partnership so designated in the Declarations and any partner thereof;
- D. If the **Named Insured** is other than an individual, sole proprietorship or partnership, the organization so designated in the Declarations, and any owner, officer, director, principal, trustee or stockholder thereof;
- E. Any employee of the **Named Insured**, but only while such employee was acting on behalf of the **Named Insured** and within the scope of the employee's duties as such or for acts performed by such employee as a Good Samaritan or unpaid volunteer during the employee's term of employment with the **Named Insured**;
- F. Any volunteer, but solely while such person was acting within the scope of the volunteer's duties for, and on behalf of, the **Named Insured**;
- G. Any professional serving as a temporary replacement or substitute for an **Insured**, but solely while such person was acting within their duties for, and on behalf of, the **Named Insured**. During the term of such replacement, the person who is replaced by, or substituted for, shall not be an **Insured** under this policy, as respects COVERAGES A. and B.

III. LIMITS OF LIABILITY

Regardless of the number of Coverage Parts that apply, the number of **Insureds** under this insurance, the number of persons and/or organizations who sustain **Bodily Injury**, **Property Damage**, **Personal Injury** and/or **Advertising Injury**, or the number of claims made or **Suits** brought, the Company's liability is limited as follows:

- A. The Limit of Liability stated in the Declarations as applicable to "each Incident" or "each Occurrence" is the total limit of the Company's liability for all Damages for "each Incident" and/or "each Occurrence" covered by the policy. All claims arising from the same or related Incident, Occurrence and/or Personal Injury shall be considered a single claim for the purpose of this insurance and shall be subject to the same Limit of Liability.
- B. The Limit of Liability stated in the Declarations as "Aggregate" is, subject to the above provisions involving "each Incident" and/or "each Occurrence," the total limit of the Company's liability under this policy for all Damages. However, the Limit of Liability stated in the Declarations as "Aggregate" shall apply separately to any individual defined as an Insured under Section II, PERSONS INSURED, Subsections A, B, C or E, or any organization defined as an Insured under Subsection D.

IV. POLICY TERRITORY

This insurance applies to Bodily Injury, Property Damage, Personal Injury, or Advertising Injury which occurs anywhere in the world, provided that claim is made or Suit is brought within the United States of America, its territories or possessions, or Canada.

V. SUPPLEMENTARY PAYMENTS

The Company will pay, in addition to the applicable Limit of Liability:





A. FIRST PARTY ASSAULT:

Up to \$10,000, for:

- 1. medical expenses incurred as a result of **Bodily Injury** to the **Insured**; and
- 2. repair or replacement of personal property owned by the Insured;

caused by any one **Assault** by, or at the direction of, a person other than an **Insured** during the **Policy Period**, which happens on the **Insured's** workplace premises, including the ways immediately adjoining such workplace premises, while away from such workplace premises while conducting an authorized work activity, or while travelling to or from such workplace premises.

Subject to the foregoing, the total amounts payable under this extension shall not exceed \$25,000 for all **Assaults** which happen during the **Policy Period**.

This coverage does not apply to damage to any mode of transportation used by the **Insured** to go to and from the **Insured's** workplace premises, or damage to any business or personal property owned, leased or rented by any other person or business enterprise while in the **Insured's** possession.

This coverage applies as excess over any other available insurance covering such loss;

B. LICENSING BOARD REIMBURSEMENT:

Up to \$10,000 for attorney fees, and other costs, expenses or fees resulting from the investigation or defense of all proceedings before any entity responsible for regulating the **Insured's** professional conduct, arising out of an **Incident**, incurred as a result of notice or notices of proceedings first received by the **Insured** during the **Policy Period**. This payment, however, does not apply to any expenses or fees resulting from criminal proceedings.

All such proceedings arising out of the same or related Incident shall be:

- considered first made during the Policy Period in which the earliest complaint arising out of such same or related Incident was made; and
- 2. subject to a single limit as stated above.

Subject to the foregoing, the total amounts payable under this extension shall not exceed \$25,000 for all **Incidents** of which notice or notices are first received by all **Insureds** during the **Policy Period**.

C. WAGE LOSS AND EXPENSE:

For lost wages, costs and expenses, caused by the Insured's attendance at the Company's request at any trial(s), hearing(s) or arbitration proceedings(s) involving a civil Suit(s) against such Insured for covered Damages the Company will pay up to \$500 per Insured per day for the Insured's lost wages, costs and expenses. Regardless of the number of Insureds, trials, hearings or arbitration proceedings, the amount so payable for any one series of trials, hearings or arbitration proceedings arising out of the same Incident and/or Occurrence shall not exceed \$10,000. The maximum amount the Company will pay for all Incidents and/or Occurrences during the Policy Period shall not exceed \$25,000.

D. DEPOSITION EXPENSE:

Up to \$10,000, for all reasonable fees, costs and expenses necessary to represent the **Insured** at all depositions, which the **Insured** is required to attend, arising out of the profession indicated in the Declarations, of which notice or notices of required attendance are first received by the **Insured** during the **Policy Period**. This payment does not apply to any deposition where the **Insured** is acting as a paid expert.





E. FIRST AID REIMBURSEMENT:

Up to \$10,000, for all medical related expenses for which the **Insured** has voluntarily made payment or incurred, for first aid rendered to others because of any **Bodily Injury** covered by this policy. For purposes of this Supplementary Payment, first aid is the provision of initial care for an illness or injury until definitive medical treatment can be accessed.

This provision does not apply to **Bodily Injury** to any person defined as an **Insured** in this policy.

F. MEDICAL PAYMENTS:

The Company will pay, in addition to the applicable Limit of Liability, up to \$10,000 per person, to or for each person who sustains **Bodily Injury** caused by an **Occurrence** during the **Policy Period**:

- while on the premises owned by or rented to the Insured with the permission of the Insured;
 or
- 2. while elsewhere if such **Bodily Injury**:
 - a. arises out of the premises owned by or rented to the **Insured** or a condition in the ways immediately adjoining; or
 - b. is caused by the activities of the **Insured**; or
 - c. is caused by the activities of, or is sustained by, a residence employee while engaged in activities as a lawful employee of the **Insured**;

the reasonable expense of necessary medical, surgical, ambulance, hospital, professional nursing and funeral services, all incurred within four (4) years from the date of **Occurrence**.

Subject to the foregoing, the total amounts payable under this extension shall not exceed \$100,000 for all persons who sustain **Bodily Injury**.

G. DAMAGE TO PROPERTY OF OTHERS:

The Company will pay, in addition to the applicable Limit of Liability, up to \$10,000 for all damage to the property of others that is caused by the **Insured** during the **Policy Period**. The Company will not pay for damage to the property of others if such damage arises out of:

- 1. any act or omission with regard to any premises, other than your residence premises, which is owned, rented or controlled by an **Insured**; or
- 2. the **Insured's** ownership, use, care, or entrustment to others of an **Automobile**, **Mobile Equipment**, watercraft or aircraft.

Within sixty (60) days from the date of loss, the **Insured** must submit a sworn statement of such loss to the Company. The **Insured** must also exhibit the damaged property if such property is in the **Insured's** possession and/or control.

Subject to the foregoing, the total amounts payable under this extension shall not exceed \$10,000 during the **Policy Period**.

VI. EXCLUSIONS

This insurance does not apply:

- 1. with respect to **Advertising Injury**:
 - a. to any Insured in the business of advertising, broadcasting, publishing or telecasting; or



- b. to any injury arising out of any act committed by any Insured with actual malice;
- 2. to Advertising Injury arising out of:
 - failure of performance of contract, but this exclusion does not apply to the unauthorized appropriation of ideas based upon alleged breach of implied contract; or
 - b. infringement of trademark, service mark or trade name, other than titles or slogans, by use thereof on or in connection with goods, products or services sold, offered for sale or advertised; or
 - incorrect description or mistake in advertised price of goods, products or services sold, offered for sale or advertised;
- to any obligation for which the Insured, or any carrier as his/her insurer, may be held liable under any workers' compensation, unemployment compensation or disability benefits law, or under any similar law;
- to Bodily Injury or Personal Injury to any employee of the Insured arising out of and in the course of his/her employment by the Insured or to any obligation of the Insured to indemnify another because of Damages arising out of such injury;
- 5. to **Bodily Injury** or **Property Damage** arising out of the ownership, maintenance, operation, use, loading or unloading of:
 - a. any watercraft owned or operated by or rented or loaned to any Insured; or
 - b. any other watercraft operated by any person in the course of his/her employment by any Insured.

This exclusion does not apply to any watercraft under 26 feet in length provided such watercraft is neither owned by the **Named Insured** nor being used to carry persons or property for a charge. Irrespective of this coverage, where the **Insured** is covered or protected by other insurance against any loss or claim which would otherwise have been paid by the Company under this policy there shall be no contribution or participation by this Company on the basis of excess, contributing, deficiency, concurrent, or double insurance or otherwise;

6. to any claim, action, judgement, liability, settlement, loss, defense, cost or expense in anyway arising out of actual, alleged or threatened pollution, contamination or any environmental impairment resulting from seepage, discharge, dispersal, release or escape of any solid, liquid, gaseous or radioactive matter including, but not limited to, smoke, vapors, soots, fumes, acids, alkalis, chemicals or toxic matter; or waste material (including materials to be recycled, reconditioned or reclaimed); or oil or other petroleum substances or derivatives (including oil refuse or oil mixed with waste), or thermal or vibratory effect including, but not limited to, sound or noise, heat or cold, into or upon land, the atmosphere or any water course or body of water, underground water or water table supplies, whether such results directly, indirectly or in concurrence or in any sequence from the Insured's activities or the activities of others and whether or not such is sudden, gradual, accidental, intended, foreseeable, expected, fortuitous or inevitable and wherever or however such occurs.

But this exclusion shall not apply to **Bodily Injury** or **Property Damage** caused by heat, smoke or fumes from a **Hostile Fire** unless such fire involves:

- a. materials which are or were at any time used for the handling, storage, disposal, processing or treatment of waste; or
- b. any premises, site or location:
 - i. which is or was at any time used for handling, storage, disposal, processing or treatment of waste; or
 - ii. on which any **Insured** or contractors or subcontractors working directly or indirectly on any **Insured's** behalf are performing operations to test for, monitor, cleanup, remove, contain, treat, detoxify or neutralize, or in any way respond to, or assess the effects of, pollutants;
- to Bodily Injury or Property Damage due to war, whether or not declared, civil war, insurrection, rebellion
 or revolution or to any act or condition Incident to any of the foregoing;



- 8. to Bodily Injury or Property Damage for which the Insured or the Insured's indemnitee may be liable:
 - a. as a person or organization engaged in the business of manufacturing, distributing, selling or serving alcoholic beverages; or
 - b. if not so engaged, as an owner or lessor of premises used for such purposes, if such liability is imposed by, or because of, the violation of any statute, ordinance or regulation pertaining to the sale, gift, distribution or use of any alcoholic beverage, including the selling, serving or giving of any alcoholic beverage to a minor;
- 9. to Property Damage included within:
 - a. the Explosion Hazard;
 - b. the Collapse Hazard;
 - the Underground Property Damage Hazard;
- 10. to any dishonest, fraudulent, criminal or malicious act or omission of any Insured;
- 11. to any claim made by an employer against an Insured if the Insured is a salaried employee of such employer;
- 12. to acts or omissions by any Insured expected or intended to cause Bodily Injury or Property Damage regardless or whether or not such act or omission was intended to cause the specific Bodily Injury or Property Damage sustained. This exclusion shall not apply to any intentional act by or at the direction of the Insured which results in Bodily Injury, if such Bodily Injury arises solely from the use of reasonable force for the purpose of protecting persons or property;
- 13. to liability assumed by any Insured under any contract or agreement except to the extent:
 - such Insured would be liable in the absence of such contract or agreement, including liability assumed by any Insured under a contract or agreement with a Health Maintenance Organization, Preferred Provider Organization, Independent Practice Association, or any other similar organization;
 - the contract or agreement is an Incidental Contract and COVERAGE B, GENERAL LIABILITY COVERAGE has been purchased;
- 14. to **Bodily Injury** or **Property Damage** arising out of the ownership, maintenance, operation, use, loading or unloading of:
 - a. any Automobile or aircraft owned or operated by or rented or loaned to any Insured; or
 - b. any other **Automobile** or aircraft operated by any person in the course of his or her employment by any **Insured**; but this exclusion does not apply to the parking of an **Automobile** on premises owned by, rented to or controlled by the **Named Insured** or the ways immediately adjoining, if such **Automobile** is not owned by or rented or loaned to any **Insured**;
- 15. to Bodily Injury or Property Damage arising out of:
 - the ownership, maintenance, operation, use, loading or unloading of any **Mobile Equipment** while being used in any prearranged or organized racing, speed or demolition contest or in any stunting activity or in practice or preparation for any such contest or activity; or
 - b. the operation or use of any snowmobile or trailer designed for use therewith;
- 16. to **Bodily Injury** or **Property Damage** arising out of and in the course of the transportation of **Mobile** Equipment by an **Automobile** owned or operated by or rented or loaned to any **Insured**;
- 17. to Property Damage to:
 - a. property owned, rented or occupied by, the Named Insured; or
 - b. personal property in the care, custody or control of the **Insured**;



- to Property Damage to premises alienated by the Named Insured arising out of such premises or any part thereof;
- 19. to loss of use of tangible property which has not been physically injured or destroyed resulting from:
 - a delay in or lack of performance by or on behalf of the Named Insured or any contract or agreement; or
 - the failure of the Named Insured's Products or work performed by or on behalf of the Named Insured to meet with the level of performance, quality, fitness or durability warranted or represented by the Named Insured;

but this exclusion does not apply to loss of use of other tangible property resulting from the sudden and accidental physical injury to or destruction of the Named Insured's Product or work performed by or on behalf of the Named Insured after such products or work have been put to use by any person or organization other than an Insured;

- 20. to **Property Damage** to the **Named Insured's Products** arising out of the use of such products or any part of such products;
- 21. to claims brought for the withdrawal, inspection, repair, replacement, or loss of use of the Named Insured's Products or work completed by or for the Named Insured or any property of which such products or work form a part, if such products, work or property are withdrawn from the market or from use because of any known or suspected defect or deficiency therein;
- 22. to claims brought against any **Insured** as a proprietor, owner, partner, manager, superintendent, or officer of any hospital, sanitarium, medical clinic, health maintenance organization, managed care facility, foster care agency, adoption agency or any other facility not specified in the Declarations or any endorsement thereto;
- 23. to claims arising out of the services performed by any **Insured** as a physician, surgeon, dentist, nurse midwife, chiropractor, podiatrist, osteopath, psychiatrist, cytotechnologist, or perfusionist, except for services performed as an optometric physician, or to claims brought against the **Insured** arising out of any trade, business, employment, profession or occupation other than as specified in the Declarations or any endorsement thereto;
- 24. to claims based on or arising out of the practice of the Named Insured's business or professional occupation as stated in the Declarations unless the Insured is properly licensed or certified by the laws of the state(s) in which the Insured practices or conducts business or is otherwise qualified to practice the Named Insured's business or professional occupation in the absence of such law;
- 25. to claims based on or arising out of services provided by any **Insured**, to the extent such services are not authorized or permitted by the laws of the state(s) in which such **Insured** practices or conducts business;
- 26. to any claims based on or arising out of any act or omission by an Insured with respect to hiring, termination, harassment, compensation, or the tenure, term, condition, benefits or privilege of employment of any such person;
- 27. to any claims made or Suits brought against any Insured alleging in whole or part;
 - a. physical assault, abuse, molestation, or habitual neglect, or licentious, immoral, amoral or other behavior that was committed or alleged to have been committed, by the **Insured** or by any person for whom the **Insured** is legally responsible; and/or
 - b. sexual assault, abuse, or molestation, or licentious, immoral, amoral or other behavior which was threatened, intended to, lead to or culminated in, any sexual act whether committed intentionally, negligently, inadvertently or with the belief, erroneous or otherwise, that the other party is consenting and has the legal and mental capacity to consent thereto, that was committed, or alleged to have been committed by the Insured or by any person for whom the Insured is legally responsible.

This exclusion applies regardless of the legal theory or basis upon which the Insured is alleged to be legally liable or responsible in whole or in part, for any Damages arising out of sexual and/or physical abuse,



including but not limited to assertions of improper or negligent hiring, employment or supervision, failure to protect or warn the other party, failure to prevent the sexual abuse and/or physical abuse, failure to prevent assault and battery, failure to discharge the employee.

However, notwithstanding the foregoing exclusion, the **Insured** shall be entitled to a defense as provided under the terms of the policy as to any claim upon which **Suit** is brought for any such alleged behavior, unless a judgment or final adjudication adverse to any **Insured** or an admission by any **Insured**, shall establish that such behavior caused, in whole or part, the injury claimed in such claim or **Suit**. The Company shall not be required to appeal a judgment or final adjudication adverse to the **Insured**. This duty to defend will not apply to claims brought alleging conduct specified in Exclusion 26, above;

- 28. to Bodily Injury and Property Damage included within the Products Hazard or Completed Operations Hazard;
- 29. to Personal Injury or Advertising Injury arising out of:
 - a. the willful violation of a penal statute or ordinance committed by or with the knowledge or consent of the Insured;
 - a publication or utterance of a libel or slander, or a publication or utterance in violation of an individual's right of privacy if the first injurious publication or utterance of the same or similar material by or on behalf of the Named Insured was made prior to the effective date of this insurance;
 - c. libel or slander or the publication or utterance of defamatory or disparaging material concerning any person or organization or goods, products or services, or in violation of an individual's right of privacy, made by or at the direction of the **Insured** with knowledge of falsity thereof;
- to any claim brought by, or on behalf of, any Insured under this policy against any other Insured under this
 policy, except if such claim results from services rendered in a patient or client relationship;

VII. DEFINITIONS

When used in this policy (including endorsements forming a part hereof):

- "Advertising Injury" means injury arising out of an offense committed during the Policy Period occurring in the course of the Named Insured's advertising activities, if such injury arises out of libel, slander, defamation, violation or right of privacy, piracy, or infringement of copyright, title or slogan;
- "Assault" means any willful attempt or threat to inflict injury upon the person of another, when coupled with an apparent present ability to do so, and any intentional display of force such as would give the victim reason to fear or expect immediate bodily harm;
- "Automobile" means any land motor vehicle, tractor, trailer or semi-trailer designed for travel on public roads (including any machinery or apparatus attached thereto), but does not include Mobile Equipment;
- "Bodily Injury" means bodily injury, sickness or disease, mental anguish, psychological injury or emotional distress sustained by any person which occurs during the Policy Period including death at any time resulting therefrom;

"Claims Expenses" means:

- A. fees charged by an attorney(s) and/or independent adjustor(s) designated by the Company and all other fees, costs and expenses resulting from the investigation, adjustment, defense and appeal of a claim, Suit or proceedings arising in connection therewith, if incurred by the Company, or by the Insured with written consent of the Company, but does not include salary charges or expenses of regular employees or officials of the Company;
- B. all costs taxed against the **Insured** in such **Suits** and all interest on the entire amount of any judgment therein which accrues after entry of the judgement and before the Company has paid, tendered or deposited, whether in court or otherwise, the part of the judgement which does not exceed the limit of the Company's liability;



C. premiums on appeal bonds and premiums on bonds to release attachments in such Suits, but not for bond amounts in excess of the applicable Limit of Liability of this policy, but the Company shall have no obligation to apply for or furnish any such bond;

"Collapse Hazard" includes "Structural Property Damage" as defined herein and Property Damage to any other property at any time resulting therefrom. "Structural Property Damage" means the collapse of or structural injury to any building or structure due to:

- grading of land, excavating, burrowing, filling, back-filling, tunneling, pile driving, cofferdam work or caisson work; or
- B. moving, shoring, underpinning, razing or demolition of any building or structure or removal or rebuilding of any structural support thereof.

The Collapse Hazard does not include Property Damage:

- A. arising out of operations performed for the Named Insured by independent contractors; or
- B. included within the Completed Operations Hazard or the Underground Property Damage Hazard; or
- C. for which liability is assumed by the Insured under an Incidental Contract;

"Completed Operations Hazard" includes Bodily Injury and Property Damage arising out of operations or reliance upon a representation or warranty made at any time with respect thereto, but only if the Bodily Injury or Property Damage occurs after such operations have been completed or abandoned and occurs away from premises owned by or rented to the Named Insured. "Operations" includes materials, parts or equipment furnished in connection therewith. Operations shall be deemed completed at the earliest of the following times:

- A. when all operations to be performed by or on behalf of the **Named Insured** under the contract have been completed; or
- B. when all operations to be performed by or on behalf of the **Named Insured** at the site of the operations have been completed; or
- C. when the portion of the work of which the **Bodily Injury** or **Property Damage** arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as part of the same project.

Operations which may require further service, maintenance work, correction, repair or replacement because of any defect or deficiency, but which are otherwise complete, shall be deemed completed.

The Completed Operations Hazard does not include Bodily Injury or Property Damage arising out of:

- A. operations in connection with the transportation of property, unless the **Bodily Injury** or **Property Damage** arises out of a condition in or on a vehicle created by the loading or unloading thereof; or
- B. the existence of tools, installed equipment or abandoned or unused material; or
- C. operations for which the classification stated in the policy or in the Company's manual specifies "including completed operations";

"Damages" means compensatory judgments, settlements or awards but does not include punitive or exemplary Damages, fines or penalties, the return of fees or other consideration paid to the Insured, or the portion of any award or judgment caused by the multiplication of actual Damages under federal or state law. However, if a Suit is brought against the Insured with respect to a claim for alleged acts or omissions falling within the scope of coverage afforded by this insurance seeking both compensatory and punitive or exemplary Damages, then the Company will afford a defense to such action, without liability however, for payment of such punitive or exemplary Damages;

"Explosion Hazard" includes Property Damage arising out of blasting or explosion. The Explosion Hazard does not include Property Damage:



- A. arising out of the explosion of air or steam vessels, piping under pressure, prime movers, machinery or power transmitting equipment; or
- B. arising out of operations performed for the Named Insured by independent contractors; or
- C. included within the Completed Operations Hazard or the Underground Property Damage Hazard; or
- D. for which liability is assumed by the Insured under an Incidental Contract;
- "Hostile Fire" means one which becomes uncontrollable or breaks out from where it was intended to be;
- "Incident" means any act or omission:
- A. in the rendering of or failure to render services by the **Insured**, or by any person for whom the **Insured** is legally responsible; including but not limited to services as a Good Samaritan; or
- B. in the performance of services by the **Insured** as a member of a formal accreditation, ethics, peer review, licensing board, standards review or similar professional board or committee of a professional organization; in the conduct of the business or professional occupation specified in the Declarations.

Any such act or omission together with all related acts or omissions shall be considered one **Incident** and be subject to the same Limit of Liability;

"Incidental Contract" means any oral or written contract or agreement relating to the operation of the Named Insured's business, except as respects Fire Legal Liability;

"Insured" means any person or organization qualifying as an Insured in Section II, PERSONS INSURED. The insurance afforded applies separately to each Insured against whom claim is made or Suit is brought, except with respect to the Company's "Each Incident" or "Each Occurrence" Limit of Liability, but this provision does not expand or alter the coverage under this policy;

"Mobile Equipment" means a land vehicle (including any machinery or apparatus attached thereto), whether or not self-propelled:

- A. not subject to motor vehicle registration; or
- B. maintained for use exclusively on premises owned by or rented to the Named Insured, including the ways immediately adjoining; or
- C. designed for use principally off public roads; or
- D. designed or maintained for the sole purpose of affording mobility to equipment of the following types forming an integral part of or permanently attached to such vehicle: power cranes, shovels, loaders, diggers and drills; concrete mixers (other than the mix-in-transit type); graders, scrapers, rollers and other road construction or repair equipment; air-compressors, pumps and generators, including spraying, welding and building cleaning equipment; and geophysical exploration and well servicing equipment;

"Named Insured" means the organization named in Item 1 of the Declarations of this policy. "Named Insured" also shall include any organization which is acquired or formed by the Named Insured and over which the Named Insured maintains ownership or majority interest, other than a joint venture, but this insurance shall not apply if such new organization is also an Insured under any other similar liability or indemnity policy or would be insured under any such policy but for exhaustion of its limits of liability. Unless written notice is given to the Company, this coverage shall terminate ninety (90) days from the date any such organization is acquired or formed by the Named Insured, or the end of the Policy Period whichever is earlier, and shall only apply to claims brought against the Insured arising out of the business or professional occupation specified in the Declarations;

"Named Insured's Products" means goods or products manufactured by the Named Insured or by others trading under the name of the Named Insured, including any container thereof;



"Occurrence" means an accident, including continuous or repeated exposure to substantially the same general conditions, which results in **Bodily Injury** or **Property Damage**, neither expected nor intended from the standpoint of any **Insured** or **Advertising Injury**;

"Personal Injury" means injury arising out of an offense committed during the Policy Period, if such injury result from:

- A. false arrest, detention or imprisonment, or malicious prosecution; or
- B. the publication or utterance of a libel or slander or of other defamatory or disparaging material, or a publication or utterance in violation of an individual's right of privacy; except publications or utterances in the course of or related to advertising, broadcasting or telecasting activities conducted by or on behalf of the Named Insured; or
- C. wrongful entry or eviction, or other invasion of the right of private occupancy;

Any such act, described in A, B or C above, together with all related acts described in A, B or C above shall be considered one **Personal Injury** and be subject to the same Limit of Liability.

"Policy Period" means, whenever used in this policy, the period from the inception date of this policy to the policy expiration date as set forth in the Declarations or its earlier termination date, if any;

"Products Hazard" includes Bodily Injury and Property Damage arising out of the Named Insured's Products or reliance upon a representation or warranty made at any time with respect thereto, but only if the Bodily Injury or Property Damage occurs away from the premises owned by or rented to the Named Insured and after physical possession of such products has been relinquished to others. Equipment specifically designed, made or altered by the Insured for a patient or client in the performance of the Insured's profession or operation of business, shall not be included in the "Products Hazard";

"Property Damage" means:

- A. physical injury to or destruction of tangible property which occurs during the **Policy Period**, including the loss of use thereof at any time resulting therefrom; or
- B. loss of use of tangible property which has not been physically injured or destroyed provided such loss of use is caused by an **Occurrence** during the **Policy Period**; or
- C. economic loss, whether or not resulting from physical injury or damage to person or property, except if such loss was caused, or alleged to have been caused, in whole or part, by anti-trust, breach of contract, price-fixing, restraint of trade or unfair business practices by any Insured;

"Suit" includes lawsuit and/or arbitration proceedings to which the Insured is required to submit to or to which the Insured has submitted with the Company's consent;

"Underground Property Damage Hazard" includes Underground Property Damage as defined herein and Property Damage to any other property at any time resulting therefrom. "Underground Property Damage" means Property Damage to wires, conduits, pipes, mains, sewers, tanks, tunnels, any similar property, and any apparatus in connection therewith, beneath the surface of the ground or water, caused by and occurring during the use of mechanical equipment for the purpose of grading land, paving, excavating, drilling, burrowing, filling, backfilling or pile driving. The Underground Property Damage Hazard does not include Property Damage:

- A. arising out of operations performed for the Named Insured by independent contractors; or
- B. included within the Completed Operations Hazard; or
- C. of which liability is assumed by the **Insured** under an **Incidental Contract**.

VIII. CONDITIONS

A. LEGAL ACTION AGAINST THE COMPANY



A person or organization may bring **Suit** against the Company including, but not limited to, a **Suit** to recover on an agreed settlement or on a final judgement against an **Insured**; but the Company will not be liable for **Damages** that are not payable under the terms of this policy or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by the Company, the **Insured** and the claimant or the claimant's legal representative.

However, no action by an **Insured** shall lie against the Company unless there has been full compliance with all of the terms of this policy.

B. ASSIGNMENT

Assignment of interest under this policy shall not bind the Company until its consent is endorsed herein; if, however, the Named Insured shall die, such insurance as afforded by this policy shall apply (1) to the Named Insured's legal representative as the Named Insured, but only while acting within the scope of his/her duties as such, and (2) with respect to the property of the Named Insured, to the person having proper temporary custody thereof, as Insured, but only until the appointment and qualification of the legal representative.

C. ASSISTANCE AND COOPERATION OF INSURED

The Insured shall give written notice to the Company as soon as practicable of any claim made against the Insured or of any specific circumstances involving a particular person likely to result in a claim. The notice shall identify the Insured and contain reasonably obtainable information with respect to the time, place and circumstances of the injury, including the names and addresses of the injured and of available witnesses and the extent of the type of claim anticipated. If a claim is made or Suit is brought against the Insured, the Insured shall immediately forward to the Company every demand, notice, summons or other process received by the Insured or the Insured's representative.

The Insured and each of its employees shall cooperate with the Company and, upon the Company's request, assist in making settlements, in the conduct of Suits and enforcing any right of contribution or indemnity against any person or organization who may be liable to the Insured because of injury or Damage with respect to which this insurance is afforded under this policy; and the Insured, and any of its members, partners, officers, directors, stockholders and employees that the Company deems necessary shall attend hearings and trials and assist in securing and giving evidence and obtaining the attendance of witnesses. The Insured shall not, except at the Insured's own cost, voluntarily make any payments, assume any obligations or incur any expense.

D. BANKRUPTCY OR INSOLVENCY

Bankruptcy or insolvency of the **Insured** or of the **Insured's** estate shall not relieve the Company of any of its obligations hereunder.

E. CANCELLATION AND NONRENEWAL

1. CANCELLATION

This insurance may be canceled on the customary short-rate basis by the Named Insured at any time by written notice or by surrender of this insurance to the Company or its authorized representative and the Company shall refund the paid premium less the earned portion thereof within thirty (30) days of the latter of the effective date of cancellation or the date of delivery of the Insured's notice of intent to cancel, subject always to the retention by the Company of any minimum premium stipulated herein (or proportion thereof previously agreed upon).

The earned portion of the premium shall be computed on the customary short-rate basis unless any state law or regulation of the state shown in the mailing address of the Named Insured in the Declarations requires that return premium be computed on a pro-rata basis, even in the event of cancellation by the Named Insured.



This insurance may also be canceled, with or without the return or tender of the unearned premium, by the Company or by its authorized representative on its behalf, by sending to the Named Insured, by first-class registered or certified mail, at the Named Insured's address last known to the Company or its authorized agent, not less than ninety (90) days written notice stating the specific reason for such cancellation and when the cancellation shall be effective. In such case, the Company shall refund the paid premium less the earned portion thereof within ten (10) business days after the effective date of cancellation, subject always to the retention by the Company of any minimum premium stipulated herein (or proportion thereof previously agreed upon) in the event of cancellation either by the Company or the Named Insured. In case of nonpayment of premium, only thirty (30) days written notice of cancellation must be given by the Company. Minimum premium shall not apply to the return of unearned premium if cancellation is by the Company.

Cancellation by the Company shall only be effective if based on one or more of the following reasons:

- a. nonpayment of premium;
- the policy was obtained through material misrepresentation that was relied on by the Company, and such policy would not have been issued by the Company under the same terms and conditions if correct information had been disclosed;
- c. material failure to comply with any policy term, condition or contractual duty;
- d. the risk originally accepted has measurably increased; or
- loss by the Company of reinsurance which provided coverage for all or a substantial part of the risk insured.

2. NONRENEWAL

The Company will renew this policy unless written notice of the Company's intent not to renew, stating the specific reasons for nonrenewal, is mailed to the **Named Insured** not less than ninety (90) days before the policy expires. "Nonrenewal" shall include the failure of the Company to offer a renewal policy which provides types and limits of coverage substantially equivalent to those contained in the expiring policy.

Any notice of cancellation or nonrenewal will be mailed by first-class registered or certified mail to the **Named Insured** at the last mailing address known to the Company. Proof of mailing will be sufficient proof of notice.

F. CHANGES

The terms of this policy shall not be waived or changed, except by endorsement issued to form a part of this policy.

G. DECLARATIONS

By acceptance of this policy, the **Insured** agrees that the statements in the Declarations are the **Insured's** agreements and representations, that this policy is issued in reliance upon the truth of such representations and that this policy embodies all agreements existing between the **Insured** and the Company or any of its agents relating to this insurance.

H. OTHER INSURANCE

If there is other valid insurance (whether primary, excess, contingent or self-insurance) which may apply against a loss or claim covered by this policy, the insurance provided hereunder shall be deemed excess insurance over and above the applicable limit of all other insurance or self-insurance. When this insurance is excess, the Company shall have no duty under this policy to defend any claim or **Suit** that any other insurer or self-insurer has a duty to defend. If such other insurer or self-insurer refuses to defend such claim or **Suit**, the Company shall be entitled to the **Insured's** rights against all such other insurers or self-insurers for any **Claims Expenses** incurred by the Company.

When both this insurance and other insurance or self-insurance apply to the loss on the same basis, whether primary, excess or contingent, the Company shall not be liable under this policy for a greater proportion of the loss or defense costs than the applicable Limit of Liability under this policy for such loss bears to the total



applicable limit of liability of all valid and collectible insurance against such loss. Subject to the foregoing, if a loss occurs involving two or more policies, each of which provides that its insurance shall be excess, each will contribute pro-rata.

I. REIMBURSEMENT

While the Company has no duty to do so, if the Company pays Damages or Claims Expenses:

- within the amount of the applicable Deductible;
- in excess of the applicable Limit of Liability,

all **Insureds** shall be jointly and severally liable to the Company for such amounts. Upon written demand, the **Insured** shall repay such amounts to the Company within thirty (30) days thereof. Failure to pay any amount indicated may lead to policy cancellation.

J. SUBROGATION

To the extent of any payment under this policy, the Company shall be subrogated to all the **Insured's** rights of recovery therefore against any person, organization or entity and the **Insured** shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights. The **Insured** shall do nothing after any loss to prejudice such rights.

K. PREMIUM

All premiums for this policy shall be computed in accordance with the Company's rules, rates, rating plans, premiums and minimum premiums applicable to the insurance afforded herein.

Premium designated in this policy is a deposit premium only which shall be credited to the amount of the earned premium due at the end of the Policy Period. At the close of each period (or part thereof terminating with the end of the Policy Period) designated in the Declarations as the audit period the earned premium shall be computed for such period, and upon notice thereof to the Named Insured, shall become due and payable. If the total earned premium for the Policy Period is less than the premium previously paid, the Company shall return to the Named Insured the unearned portion paid by the Named Insured.

The Named Insured shall maintain records of such information as is necessary for premium computation, and shall send copies of such records to the Company at the end of the Policy Period and at such times during the Policy Period as the Company may direct.

L. INSPECTION AND AUDIT

The Company shall be permitted but not obligated to inspect the Named Insured's property and operations at any time. Neither the Company's rights to make inspections, nor the making thereof, nor any report thereon shall constitute an undertaking, on behalf of or for the benefit of the Named Insured or others, to determine or warrant that such property or operations are safe or healthful, or are in compliance with any law, rule or regulation.

The Company may examine and audit the **Named Insured's** books and records at any time during the **Policy Period** and extensions thereof and within three years after the final termination of this policy as far as they relate to the subject matter of this insurance.

M. AUTHORIZATION

The first **Named Insured** listed in the Declarations or in any amendment thereto, agrees to act on behalf of all other **Insureds** with respect to the giving and receiving of all notices to the Company as may be required by the terms of this policy and in the receiving of any return premiums that may become due hereunder.

All **Insureds** agree that the first **Named Insured** listed in the Declarations or in any amendment thereto, is hereby designated to so act on their behalf.



N. LIBERALIZATION

If the Company adopts a revision, at any time during the **Policy Period**, which would broaden the coverage under this policy without additional premium, the broadened coverage will immediately apply to this policy.

IN WITNESS WHEREOF, the Company has caused this policy to be signed by its President and Secretary.

PRESIDENT Christopher L. Peirce VICE PRESIDENT and SECRETARY
Mark C. Touhey



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

INFORMATION PRIVACY SUPPLEMENTARY PAYMENT ENDORSEMENT HIPAA FINES AND PENALTIES AND NOTIFICATION COSTS

In consideration of the premium charged, it is hereby understood and agreed that this endorsement amends the following:

I. The following is added to the SUPPLEMENTARY PAYMENTS section:

HEALTH INFORMATION PRIVACY AND NOTIFICATION COSTS

Subject to the Information Privacy Aggregate Limit of Liability shown in the Schedule above, the Company will:

- pay HIPAA Fines and Penalties pursuant to the Health Insurance Portability and Accountability Act ("HIPAA"),
 which the Insured becomes legally obligated to pay arising from a HIPAA Proceeding with respect to the
 management and transmission of Confidential Health Information;
- 2. reimburse the insured for notification costs related to the disclosure of **Confidential Personal Information** provided that the insured obtain the Company's prior approval before incurring such costs; and
- 3. pay Claims Expenses related to 1. and 2. above.
- II. With respect to the coverage provided by this endorsement, the following are added to the DEFINITIONS section of the policy:

Confidential Health Information means information pertaining to a patient or a client that has been received or created by the Insured or provided by the Insured to another, subject to protection pursuant to HIPAA, including, but not limited to, an individual's health information, healthcare treatment information and the fact that the such individual has been treated by any provider.

Confidential Personal Information means information not available to the general public from which an individual may be identified, including, without limitation, an individual's name, address, telephone number, social security number, account relationship, account number(s), account balance(s) and account history(ies).

1 2



HIPAA Fines and Penalties means fines and penalties for failure to comply with the requirements and standards of HIPAA, including fines and penalties imposed by the Department of Health and Human Services or its designees. HIPAA fines and penalties do not include fines and penalties imposed for a knowing wrongful disclosure of individually identifiable health information.

HIPAA Proceeding means an administrative proceeding, including a complaint, investigation or hearing instituted against the Insured by the Department of Health and Human Services or its designee alleging a violation of responsibilities or duties imposed upon the Insured under HIPAA or any rules or regulations promulgated thereunder, with respect to the management of confidential health information, but solely to the extent that:

- 1. such proceeding is commenced during the policy period; and
- 2. reported to the Insured within sixty (60) days after the Insured receive notice of such proceeding.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

ENDORSEMENT NO. []

Effective Date: 03/09/2021

Policy Number: AHY-993419002

Issued To: Speech at Home

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT BROAD FORM

It is agreed that:

- I. The policy does not apply:
 - A. Under any Liability Coverage, to Bodily Injury or Property Damage:
 - (1) with respect to which an Insured under the policy is also an Insured under a Nuclear Energy Liability Policy issued by Nuclear Energy Liability Insurance Association, Mutual Atomic Energy Liability Underwriters or Nuclear Insurance Association of Canada, or would be an Insured under any such policy but for its termination upon the exhaustion of its Limit of Liability; or
 - (2) resulting from the Hazardous Properties of Nuclear Material and with respect to which (a) any person or organization is required to maintain financial protection pursuant to the Atomic Energy Act of 1954, or any law mandatory thereof, or (b) the Insured is, or had this policy not been issued would be entitled to indemnity from the United States of America or any agency thereof, under any agreement entered into by the United States of America, or any agency thereof, with any person or organization.
 - B. Under any Medical Payments Coverage, or under any Supplementary Payments or Claims Expenses provision relating to first aid, to expenses incurred with respect **Bodily Injury** resulting from the **Hazardous Properties of Nuclear Material** and arising out of the operation of a **Nuclear Facility** by any person or organization.
 - C. Under any Liability Coverage, to **Bodily Injury** or **Property Damage** resulting from the **Hazardous Properties** of **Nuclear Material**; if
 - (1) the **Nuclear Material**: (a) is at any **Nuclear Facility** owned by, or operated by or operated on behalf of, any **Insured** or (b) has been discharged or dispersed therefrom;
 - (2) the Nuclear Material is contained in Spent Fuel or Waste at any time possessed, handled, used, processed, stored, transported or disposed of by or on behalf of an Insured; or



(3) the **Bodily Injury** or **Property Damage** arises out of the furnishing by an **Insured** of services, materials, parts or equipment in connection with the planning, construction, maintenance, operation or use of any **Nuclear Facility**, but if such facility is located within the United States of America, its territories or possession or Canada, this exclusion (3) applies only to **Property Damage** to such **Nuclear Facility** and any property thereof.

II. As used in this endorsement:

"Hazardous Properties" include radioactive, toxic or explosive properties;

"Nuclear Material" means Source Material, Special Nuclear Material or By-product Material;

"Source Material" "Special Nuclear Material" and "By-product Material" have the meanings given them in the Atomic Energy Act of 1954 or in any law amendatory thereof;

"Spent Fuel" means any fuel element or fuel component, solid or liquid, which has been used or exposed to radiation in a Nuclear Reactor;

"Waste" means any waste material:

- (a) containing By-product Material other than the tailings or Wastes produced by the extraction or concentration of uranium or thorium from any ore processed primary for its source material content; and
- (b) resulting from the operation by any person or organization of any Nuclear Facility included under the first two paragraphs of the definition of Nuclear Facility;

"Nuclear Facility" means:

- (a) any Nuclear Reactor;
- (b) any equipment or device designed or used for (1) separating the isotopes of uranium or plutonium, (2) processing or utilizing **Spent Fuel**, or (3) handling, processing or packaging **Waste**;
- (c) any equipment or device used for the processing, fabricating or alloying of **Special Nuclear Material** if at any time the total amount of such material in the custody of the **Insured** at the premises where such equipment or device is located consists of or contains more than 25 grams of plutonium or uranium 233 or any combination thereof, or more than 250 grams of uranium 235;
- (d) any structure, basis, excavation, premises or place prepared or used for the storage of disposal of Waste, and includes the site on which any of the foregoing is located, all operations conducted on such site and all premises used for such operations;

"Nuclear Reactor" means any apparatus designed or used to sustain nuclear fission in self-supporting chain reaction or to contains critical mass of fissionable material;

"Property Damage" includes all forms of radioactive contamination of property.



New York - It is agreed that the provisions of the "Nuclear Energy Liability Exclusion Endorsement-Board Form" printed above, do not apply in New York with respect to any Non-Owned Auto Liability Coverage afforded by this policy.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.



LIBERTY INSURANCE UNDERWRITERS, INC.

(A Stock Insurance Company, hereinafter the "Company")

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CALIFORNIA AMENDATORY ENDORSEMENT

I. In consideration of the premium paid, it is hereby agreed and understood that Paragraph 1. of Part VIII.E., CONDITIONS, of the above referenced policy is hereby deleted in its entirety and replaced with the following:

1. CANCELLATION

This insurance may be canceled on the customary short-rate basis by the Named Insured at any time by written notice or by surrender of this policy to the Company or its authorized representative and the Company shall refund the paid premium less the earned portion thereof within thirty (30) days of the latter of the effective date of cancellation or the date of delivery of the Insured's notice of intent to cancel, subject always to the retention by the Company of any minimum premium stipulated herein (or proportion thereof previously agreed upon).

The earned portion of the premium shall be computed on the customary short-rate basis unless any state law or regulation of the state shown in the mailing address of the **Named Insured** in the Declarations requires that return premium be computed on a pro-rata basis, even in the event of cancellation by the **Named Insured**.

This insurance may also be canceled, by the Company or by its authorized representative on its behalf, by sending to the Named Insured, by first-class registered or certified mail, at the Named Insured's address last known to the Company or its authorized agent, not less than ninety (90) days written notice stating the specific reason for such cancellation and when the cancellation shall be effective. In such case, the Company shall refund the paid premium less the earned portion thereof within ten (10) business days after the effective date of cancellation, subject always to the retention by the Company of any minimum premium stipulated herein (or proportion thereof previously agreed upon) in the event of cancellation either by the Company or the Named Insured. In case of non-payment of premium, only thirty (30) days written notice of cancellation must be given by the Company. Minimum premium shall not apply to the return of unearned premium if cancellation is by the Company.

A copy of such notice shall also be sent to the **Named Insured's** producer, if any (provided that the **Named Insured's** producer is not an employee of the Company).

If the policy has been in effect for sixty (60) days or less, cancellation by the Company shall only be effective if based on one or more of the following reasons:

- a. non-payment of premium;
- b. this policy was obtained through material misrepresentation that was relied on by the Company, and such policy would not have been issued by the Company under the same terms and conditions if correct information had been disclosed;
- material failure to comply with any policy term, condition or contractual duty;
- d. the risk originally accepted under this policy has measurably increased; or
- e. the Company's loss of the reinsurance that provided coverage for all or a substantial part of the risk insured under this policy.

If the policy has been in effect for more than sixty (60) days, cancellation by the Company shall only be effective if based on one or more of the following reasons:



- a. non-payment of premium when due, including payment due on a prior policy issued by the Company and due during the current **Policy Period** covering the same risks insured under the policy;
- b. any **Insured** has violated any law of this state or of the United States pursuant to a judgment by a court or administrative tribunal and such violation has as one of its elements an act that materially increases a risk insured against under the policy;
- c. discovery of fraud or material misrepresentation committed by any Insured or any Insured's representative in either obtaining this insurance or pursuing a claim under the policy;
- d. discovery of a wilful or grossly negligent act or omission or of a violation of state law or regulation governing safety standards committed by any **Insured** that materially increases a risk insured against under the policy;
- e. any **Insured** or any **Insured's** representative has failed to implement any reasonable loss control requirement, agreed to as a condition of this insurance, and such failure materially increases a risk insured against under the policy;
- f. discovery of a change any **Insured** has made in any activity or property of the commercial or industrial enterprise resulting in a material, added risk, a materially-increased risk or a materially-changed risk, unless the added, increased or changed risk is included in the policy;
- determination by the California Commissioner of Insurance that loss of or change to any of the Company's reinsurance covering all or part of the risk insured against would threaten the Company's solvency or financial integrity; or
- h. determination by the California Commissioner of Insurance that continuation of the policy's coverage would place the Company in violation of any law in California or New York or that continuation of coverage would jeopardize the Company's solvency.
- II. In addition, it is hereby agreed and understood that Paragraph 2. of Part VIII.E., CONDITIONS, of the above referenced policy is hereby deleted in its entirety and replaced with the following:
 - 2. NONRENEWAL

The Company will renew this policy unless written notice of the Company's intent not to renew, stating the specific reasons for nonrenewal, is mailed to the **Named Insured** not less than ninety (90) days but no more than one hundred twenty (120) days before the policy expires. "Nonrenewal" shall include the failure of the Company to offer a renewal policy which provides types and limits of coverage substantially equivalent to those contained in the expiring policy.

A copy of such notice shall also be sent to the **Named Insured's** producer, if any (provided that the **Named Insured's** producer is not an employee of the Company).

ALL OTHER TERMS, CONDITIONS AND EXCLUSIONS REMAIN UNCHANGED.



PROFESSIONAL LIABILITY

LIBERTY INSURANCE UNDERWRITERS INC.

(A New York Stock Insurance Company, hereinafter the "Insurer")

ENDORSEMENT NO. []

Effective Date:

03/09/2021

Policy Number:

AHY-993419002

Issued To:

Speech at Home

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

U.S. ECONOMIC AND TRADE SANCTIONS ENDORSEMENT

Whenever coverage provided by this policy would be in violation of any U.S. economic or trade sanctions such as, but not limited to, those sanctions administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"), such coverage shall be null and void.

Similarly, any coverage relating to or referred to in any certificates or other evidences of insurance or any claim that would be in violation of U.S. economic or trade sanctions as described above shall also be null and void.



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

ENDORSEMENT NO. []

Effective Date: 03/09/2021
Policy Number: AHY-993419002
Issued To: Speech at Home
Return Premium \$ Additional Premium
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
This endorsement modifies insurance provided under the following:
MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY
MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY - INDIVIDUAL
INTRAOPERATIVE NEUROPHYSIOLOGICAL MONITORING PROCEDURE EXCLUSION ENDORSEMENT
In consideration of the premium charged, the following is added to SECTION VI, EXCLUSIONS
to Bodily Injury arising out of any:
a. intraoperative neurophysiological monitoring services; or b. supervision of intraoperative neurophysiological monitoring services provided by the Insured

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

ENDORSEMENT NO. []

Effective Date: 03/09/2021
Policy Number: AHY-993419002
Issued To: Speech at Home
Return Premium \$\bigs\\$ Additional Premium

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

STUDENT PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY
SPECIFIED MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY –
STUDENT INDIVIDUAL

MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY
MEDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY – INDIVIDUAL

EXCLUSION OF SPECIFIED ACTIVITIES – REUSE OF PARENTERAL DEVICES AND SUPPLIES

In consideration of the premium charged, this policy shall not apply to **Bodily Injury** or **Property Damage for,** based upon, arising out of or related to any acts, errors or omissions involving **Reuse** of:

- needles or syringes;
- 2. catheters or ports, including implanted ports;
- 3. intravenous solution, whether intended for direct intravenous administration or as a source of diluent for medication or any other substance to be administered parenterally;
- 4. intravenous medications intended for direct intravenous administration, including heparin or sodium chloride used for flushing venous access devices;
- 5. lines, including intravenous lines, tubing and any connectors thereto; or
- 6. any other types of parenteral device or supply used to inject medications, administer parenteral substances or withdraw blood samples;

in contravention of the instructions, warnings or recommendations of the manufacturer of such parenteral device or supply, or any standards regarding safe injection practices, intravenous therapy guidelines, infection control or any other pertinent recommendations or guidelines promulgated by



the Center for Disease Control and Prevention or any other state or federal agency or governmental authority regulating the use of such parenteral device or supply.

Reuse includes:

- 1. the use of any catheter, line or tubing, including any connectors thereto, on any person after its removal from a person, or after its use for any other purpose wherein it may have become contaminated or is otherwise no longer sterile; or
- 2. the introduction of any syringe, needle, or other parenteral device or supply into a multi-dose vial or intravenous solution after such syringe's, needle's, device's or supply's initial use.

Reuse does not include more than one parenteral access of a single patient by means of an implanted port or an indwelling various-access device intended to be used for multiple parenteral access, including but not limited to peripheral various devices, arterial devices and central venous devices, including tunneled and non-tunneled devices, or a PICC (peripherally inserted central catheter) line provided that any such procedure comports with:

- 1. the instructions, warnings and recommendations of the manufacturer of such parenteral device or supply; and
- 2. any standards regarding safe injection practices, intravenous therapy guidelines, infection control or any other pertinent recommendations or guidelines promulgated by the Center for Disease Control and Prevention or any other state or federal agency or governmental authority regulating the use of such parenteral device or supply, including any protocol prohibiting reuse of any syringe, needle or other parenteral device or supply to access such port or device.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

ENDODSEMENT NO 1 1

	ENDORSEMENT NO.[]
E	Effective Date: 03/09/2021
P	Policy Number: AHY-993419002
Is	ssued To: Speech at Home
	dditional Premium \$ dditional Premium
	THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.
Thi	is endorsement modifies insurance provided under the following:
ME	EDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY
	EDICAL PROFESSIONAL LIABILITY OCCURRENCE INSURANCE POLICY – INDIVIDUAL
	SEXUAL MISCONDUCT ENDORSEMENT
	XUAL MISCONDUCT AGGREGATE SUBLIMIT OF LIABILITY: \$25,000
	In consideration of the premium charged, the following changes are made to the policy:
I.	Solely with respect to coverage provided under this endorsement, SECTION I, COVERAGES COVERAGE A, PROFESSIONAL LIABILITY COVERAGE is amended to include the following:
	With respect to Incidents alleging Sexual Misconduct on behalf of the Insured, the Company will pay Covered Sexual Misconduct Damages because of Bodily Injury or Personal and Advertising Injury to which this insurance applies, subject to the Sexual Misconduct Aggregate Sublimit of Liability stated above. Such Sexual Misconduct must actually or allegedly occur:
	1. in the operation of the business or conduct of the profession of the Named Insured as specified in the Declarations; and

2. during the Policy Period.



II. Solely with respect to COVERAGE A. PROFESSIONAL LIABILITY COVERAGE, the following is added to SECTION III, LIMITS OF LIABILITY:

The Sexual Misconduct Aggregate Sublimit of Liability indicated above is the limit of the Company's liability for the sum of all amounts the Insured is legally obligated to pay as a result of Claims involving any act of Sexual Misconduct arising out of or related to the operation of the business or conduct of the profession of the Named Insured as specified in the Declarations, provided that Sexual Misconduct has not been determined to have occurred by any civil or criminal trial verdict, court ruling, regulatory ruling or legal admission, whether appealed or not.

This Sexual Misconduct Aggregate Sublimit of Liability shall apply:

- 1. in the event that **Sexual Misconduct** is alleged, whether in a complaint, during discovery at trial or otherwise, regardless of the legal or factual theory of recovery advanced, including but not limited to assertions of improper or negligent hiring or employment, or failure to investigate or supervise; and
- 2. to any and all such Claims arising out of the same or related acts or omissions.

The Sexual Misconduct Aggregate Sublimit of Liability shall be the only source of payment of Covered Sexual Misconduct Damages, and shall be included within, and not in addition to, the Aggregate Limit of Liability specified in the Declarations.

III. SECTION VI, EXCLUSIONS, paragraph 27. is replaced by the following:

27. to any Claims made or Suits brought against any Insured alleging, in whole or part, Sexual Misconduct, and/or physical abuse of a non-sexual nature.

This exclusion applies to any **Damages** arising out of **Sexual Misconduct** other than **Covered Sexual Misconduct Damages**, and/or physical abuse of a non-sexual nature, regardless of the legal theory or basis upon which the **Insured** is alleged to be legally liable or responsible in whole or in part, including but not limited to assertions of improper or negligent hiring, employment or supervision, failure to protect or warn the other party, failure to prevent the **Sexual Misconduct** and/or physical abuse of a non-sexual nature, and failure to discharge the employee.

However, notwithstanding the foregoing exclusion, with respect to COVERAGE A, PROFESSIONAL LIABILITY COVERAGE only, the **Insured** shall be entitled to a defense as provided under the terms of the policy as to any **Claim** upon which **Suit** is brought for any such alleged behavior, unless the behavior has been determined to have occurred by any civil or criminal trial verdict, court ruling, regulatory ruling or admission, whether appealed or not. The Company shall not be required to appeal a judgment or final



adjudication adverse to the **Insured**. This duty to defend will not apply to **Claims** brought alleging conduct specified in Exclusion 26. above;

IV. The following is added to SECTION VII, DEFINITIONS:

"Covered Sexual Misconduct Damages" means that portion of any settlement falling within the Sexual Misconduct Aggregate Sublimit of Liability pertaining to any Claim for, based on, alleging in whole or in part, or arising out of Sexual Misconduct;

"Sexual Misconduct" means:

- a. physical sexual assault, abuse of a sexual nature, molestation, or licentious, immoral, amoral or other behavior that was committed or alleged to have been committed by, and/or
- b. sexual assault, abuse of a sexual nature, or molestation, or licentious, immoral, amoral or other behavior which was threatened, intended to, lead to or culminated in, any sexual act whether committed intentionally, negligently, inadvertently or with the belief, erroneous or otherwise, that the other party is consenting and has the legal and mental capacity to consent thereto, that was committed, or alleged to have been committed by,

an **Insured**, two or more **Insureds** acting together, or any person(s) for whom the **Insured** is legally responsible. Multiple, continuous or sporadic or related acts by an **Insured**, or person(s) for whom the **Insured** is legally responsible, shall be deemed one **Incident** of **Sexual Misconduct**.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.



LIBERTY INSURANCE UNDERWRITERS INC.

(A Stock Insurance Company, hereinafter the "Company")

ENDORSEMENT NO. []

Effective Date: 03/09/2021

Policy Number: AHY-993419002

Issued To:

Speech at Home

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DEFINITION OF CLAIM

In consideration of the premium charged:

I. The following is added to the DEFINITIONS Section of the policy:

"Claim" means any written demand, suit, and/or any proceeding as described in Section V., Supplementary Payments, Item B, Licensing Board Reimbursement based on or arising out of an Incident or Occurrence.

II. Further, wherever the word "claim" appears as a noun in the policy, it shall be replaced by "Claim".

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.



CSAA Insurance Exchange P.O.Box 22221 Oakland, CA 94623-2221

Automobile Policy Declarations

Please keep with your policy. See Important Notice on reverse. For questions or changes call: 800.922.8228

Page 1 of 1

1. Name and Address of Insured

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ANNA M KRAJCIN ALEN KRAJCIN 4284 DUBHE CT CONCORD, CA 94521-1820

NOI	Declarations Type	Amended Declara	tions	Process Date	04-26-2021		
RMAT	Policy Number	CAAS200613465		Insured Since	2013		
POLICY INFORMATION	Your Policy	From 04-26-2021	12:01 A.M. Standard Time at the address of the Named Insured, but not prior to the time applied for or, if this is a replacement declarations, not prior to the time coverage change was requested.				
POLI	Period	то 03-19-2022	12:01 A.M. Standard Time at the address of the Named Insured.				

Alternate Address			Occupation			Alternate Num	ber		Telephone Number			
4284 Dubhe Ct			Other							(925) 708	8-4565	
VEHICLES	Item Make 1 LEXUS 2 TOYOTA	LEXUS 2010 WAGON 4 DOOR		ITI	icle Identificati ZK1BA9A, DDZ3DC4,			DRIVERS	Drivers do not necessarily correspond to principally operated vehicles.	Anna Alen		ADB?* Y N
	Coverage	Liabil	ity Limits	Itei	m 1	Ite	m 2					
	Coverage	Each Person	Each Occurrence	Deductible	Premium	Deductible	Premiur	n	Deductible	Premium	Deductible	Premium
	Bodily Injury	500,000	500,000		\$209		\$112	<u> </u>				
	Medical Payments	No Coverage		No Cove	rage	No Co	verage					
ı	Uninsured Motorists	100,000	300,000		\$45		\$37	,				
	Property Damage		100,000		\$282	\$19	\$193	13				
COVERAGES/PREMIUMS	Comprehensive Actual Ca Full Comprehensive Safety G (\$0 deductible)	ash Value Less De lass Endorsemer		100 NO COV	\$112	100 NO COV	\$98	3				
PREI	Collision Actual Ca	sh Value Less Ded	uctible	500	\$429	500	\$532					
AGES/	Enhanced Transportation Exp \$25 per day/\$750 aggrega						\$28					
VER	All Risks Actual Cas	Actual Cash Value Less Deductible		No Cove	rage	No Co	erage					
8	Vehicle Loan/Lease Protection	Endorsement		No Cove	rage	No Cov	erage					
	New Car Added Protection End	dorsement		No Cove	rage	No Cov	erage				,	
Original Equipment Manufacturer Parts (OEM) Endorsement			No Cove	rage	No Cov	erage						
	Ride-sharing Coverage Endors	ement		No Cove	rage	No Cov	erage					
	TOTAL PRE	MIUM PER VEHIC	LE >		\$1,105		\$1,000	1	Armei I III-RA	,	,	
İ	* Automobile Death Benefits	\$15,000 per de	ceased insured p	erson								

Premium Summary

This is not a bill.

CA Surcharge: \$0

Total Additional Premium:

\$0.00

Total Premium shown is for the Member Advantage™ Program.

EXCLUSIONS

There is no coverage provided by this Policy while the following individual(s) operate a motor vehicle: None

Schedule of Changes Maintain General Information

DISCOUNTS/MESSAGES	1 2	Rated Driver Alen Krajcin Anna Krajcin	Driv Safety Record O Pt O Pt	Yrs Driv Exp 19 30	Est Ann Mi Driven 11943 Mi 1200 Mi	Veh Garage Zip 94521 94521	Vehicle Usage Commute Business	Marital M M	See final page for explanation of codes.
DISCOUNTS	Good	ounts: Ire Driver: None. I Driver: Item(s) 1, 2. Policy Home: Item(s				Nev	ti Car: Item(s) 1, 2. v Driver:None. vd Student: None.		
PAYEE(S)								and disco	ualify for other products unts. For more info call r Insurance Agent
LOSS P									ee Ann Tortorice 925) 287-7624

IMPORTANT NOTICE: THIS IS A PART OF YOUR DECLARATIONS

The insurance afforded is only with respect to such of the preceding coverages as are indicated by specific premium charge or charges. The limit of the Exchange's liability under each such coverage shall be as stated herein, subject to all the terms of the policy. The purpose for which the automobile is to be used is pleasure or business, subject to the exclusions in the policy, including the exclusion for wholesale and retail delivery.

RENEWAL CERTIFICATE - Extends this policy for the period shown under Policy Period upon payment of the premium.

AMENDED DECLARATIONS - In consideration of the premium adjustment indicated herein this policy is hereby amended only with respect to such changes as are indicated in the schedule of changes. The limit of the Exchange's liability under such amended coverage shall be as stated herein.

LOSS PAYEE(S) - Any loss under Physical Damage coverages is payable as interest may appear to the named insured and the Loss Payee in accordance with the loss payable agreement.

RATING INFORMATION DISCLOSURE EXPLANATION

(From Discounts/Messages Section on Previous Page)

ITEM (ITEM NUMBER): Item number is the number assigned to the vehicle shown on the Declarations.

RATED DRIVER: The driver assigned to a vehicle whose attributes (e.g., years driving experience, driving safety record and marital status) are used to develop the premium.

DRIV SAFETY RECORD (DRIVING SAFETY RECORD): The total number of points assessed the driver for "principally at fault chargeable accidents" with or without injury and/or vehicle code violation convictions (tickets). A "principally at fault chargeable accident" occurs when the driver of a vehicle is at least 51% at fault for an accident and the total monetary damages (whether paid or not) in the accident exceed:

- \$750 or the accident resulted in death for losses occurring prior to 12/11/11
- \$1,000 or the accident resulted in death for losses occurring 12/11/2011 or after

Additional information on the number and types of incidents can be provided on request. Carriers use different point count systems for rating purposes. The number of points shown on your declarations would not necessarily match the number of points assigned by another carrier.

YRS DRIV EXP (YEARS DRIVING EXPERIENCE): The number of years a driver has been licensed to drive a motor vehicle anywhere in the world. However, a driver must have at least 18 months current driving experience in the United States, U.S. Territories, or Canada, before foreign country driving experience can be counted.

EST ANN MI DRIVEN (ESTIMATED ANNUAL MILES DRIVEN): The estimated number of total miles a vehicle will be driven in the coming year

VEH GARAGE ZIP (VEHICLE GARAGED ZIP CODE): The ZIP code of the location where the vehicle is garaged.

VEHICLE USAGE: Vehicles are assigned to one of five usage designations: Business Use, Work Commute, Farm Use, Farm Business Use or Pleasure.

MARITAL (MARITAL STATUS): "M" stands for Married, and "S" stands for Single.

DISCOUNTS: A reduced rate applies for each Discount listed.