



GENERAL STAR INDEMNITY COMPANY

STAMFORD, CONNECTICUT 06904-2354

(Hereinafter called the Company) A Stock Company

EXCESS LIABILITY DECLARATIONS

THIS POLICY CONSISTS OF THE DECLARATIONS AND THE ATTACHED FORM AND ENDORSEMENTS

POLICY NUMBER: IXG398535J

ITEM 1. NAMED INSURED: MICHAEL'S TRANSPORTATION SERVICE, INC.

ITEM 2. MAILING ADDRESS 140 YOLANO DRIVE / VALLEJO, CA 94589 /

ITEM 3. POLICY PERIOD: 09/15/2015 to 09/15/2016
12:01 AM Standard Time at the address of the Named Insured as stated above.

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance coverage stated in this policy.

ITEM 4. LIMIT OF INSURANCE:

Policy Aggregate Limit: \$5,000,000

ITEM 5. PREMIUM FOR POLICY:

- (a) Flat Charge: [redacted] Annual
- (b) Deposit Premium: N/A
- (c) Minimum Premium: N/A CASL Tax [redacted]
- (d) Rate: N/A
- (e) Audit Reporting Period: Not Adjustable CASL Fee [redacted]

ITEM 6. FORM AND ENDORSEMENTS ATTACHED: XS0700 09 2013, XS0001 09 2013, IL600 (01/2010), XS2113 09 2013, XS2110 09 2013, XS2114 09 2013, XS2112 09 2013, XS2125 09 2013, XS2111 09 2013, XS0402 09 2013, XS2105 09 2013, XS2120 09 2013, XS2122 09 2013, XS2102 12 2013, XS2100 09 2013, XS2124 09 2013, XS2121 09 2013, XS2143 09 2013, XS0409 09 2013, FF001 (07/1998), XS2119 09 2013, XS2116 01 2015, XS2115 09 2013, FF002 (07/1998)

issued at New York, New York this 24th day of September, 2015

GENERAL STAR INDEMNITY COMPANY

Authorized Signature

