									_			
Ą	CORD®	CERT	٦F	IC	ATE OF LIA	BIL	ITY IN	SURA	NCE		(MM/DD/YYYY) 4/2012	
	THIS CERTIFICATE IS IS	SUED AS A	МАТ	TER	OF INFORMATION ONLY	Y AND	CONFERS I	NO RIGHTS	UPON THE CERTIFICA	TE HO	LDER. 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 be endorsed. If SUBROGATION IS WAIVED, subject to											
	he terms and conditions					ndorse	ment. A sta	tement on th	is certificate does not	confer	rights to the	
certificate holder in lieu of such endorsement(s).												
	ODUCER					NAME: IIIIa COWIE						
Cornerstone Specialty Insurance Services, Inc.							PHONE (714)731-7700 FAX (A/C, No. Ext): (714)731-7750					
14252 Culver Drive, A299							E-MAIL ADDRESS: tina@cornerstonespecialty.com					
						INSURER(S) AFFORDING COVERAGE NAIC #						
Irvine CA 92604						INSURER A COntinental Casualty Company 204					20443	
INSURED							INSURER B :					
COMMUNITY ARCHITECTURE, LLP							INSURER C :					
709 42ND Street							INSURER D :					
							INSURER E :					
Sa	acramento	CA 95	819)		INSURER F :						
COVERAGES CERTIFICATE NUMBER:12/13 PL C							CERT 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.												
INSI LTF	TYPE OF INSURAL	NCE		SUBR WVD			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIM	ITS		
	GENERAL LIABILITY								EACH OCCURRENCE	\$		
	COMMERCIAL GENERAL	LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
	CLAIMS-MADE	OCCUR							MED EXP (Any one person)	\$		
]							PERSONAL & ADV INJURY	\$		
									GENERAL AGGREGATE	\$		
	GEN'L AGGREGATE LIMIT APP								PRODUCTS - COMP/OP AGG	- ·		
										\$		
									COMBINED SINGLE LIMIT			
									(Ea accident) BODILY INJURY (Per person)	\$ \$		
	ANY AUTO	CHEDULED							BODILY INJURY (Per accident			
	N	UTOS ION-OWNED							PROPERTY DAMAGE	\$		
	HIRED AUTOS	UTOS							(Per accident)	\$		
	UMBRELLA LIAB											
		OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB	CLAIMS-MADE							AGGREGATE	\$		
UED RETENTION \$							WC STATU- OTH	-				
	AND EMPLOYERS' LIABILITY	Y/N							TORY LIMITS ER			
	ANY PROPRIETOR/PARTNER/E OFFICER/MEMBER EXCLUDED		N / A						E.L. EACH ACCIDENT	\$		
	(Mandatory in NH) If yes, describe under								E.L. DISEASE - EA EMPLOYE			
	DÉSCRIPTION OF OPERATION	S below							E.L. DISEASE - POLICY LIMIT	\$		
A	Professional Lia	bility			SFA254099598		3/7/2012	3/7/2013	Each Claim		\$1,000,000	
	Claims Made								Annual Aggregate		\$2,000,000	
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) For Professional Liability coverage, the aggregate limit is the total insurance available for all covered claims reported within the policy period.												
CERTIFICATE HOLDER							CANCELLATION					
Mt. Diablo Unified School District 1936 Carlotta Dr. Concord, CA 94519						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Tina Cowie/TCOWIE						

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