

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

**CANCELLATION**

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

INSR LTR	TYPE OF INSURANCE	INSR WVD	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			CPS5033038	01/17/12	01/17/13	DAMAGE TO RENTED PREMISES (ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	COMMERCIAL GENERAL LIABILITY						CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>
	AUTOMOBILE LIABILITY						ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS
	UMBRELLA LIAB						EACH OCCURRENCE AGGREGATE DEDUCTIBLE RETENTION \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						Y/N <input type="checkbox"/> N/A ANY PRIOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) DESCRIPTION OF OPERATIONS below
A	Professional Liab			CPS5033038	01/17/12	01/17/13	E.L. DISASE - EA EMPLOYEE \$ 1,000,000 E.L. DISASE - POLICY LIMIT \$ E.L. EACH ACCIDENT \$ WC STATUTORY LIMITS OTH-ER

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.

**COVERAGES**

INSURER A: Penn Star Insurance Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	Ed Supports, LLC 463 37th St Oakland, CA 94609 ISU McNeil Insurance Agency A Division of Direct Link 7200 Redwood Blvd, Suite 400 Novato, CA 94945-3249 William W. Guan, Jr., CIC
CONTACT NAME: PHONE (A/C, No, ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: EDSUPP1	415-892-8575 415-899-8668

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

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 REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

