SEXUAL MISCONDUCT AND MOLESTATION LIABILITY INSURANCE

CLAIMS FIRST MADE AND REPORTED

NOTICE: This Coverage is Provided on a Claims Made and Reported Basis. Except to such extent as may otherwise be provided herein, the coverage afforded under this insurance policy is limited to liability for only those covered Claims that are first made against an Insured and reported to us in accordance with the notice/reporting provisions set forth in this policy. LIMIT OF LIABILITY shall be reduced and may be completely exhausted by payment of Defense Costs. Please review the coverage afforded under this insurance policy carefully and discuss the coverage hereunder with your insurance agent or broker.

The consideration for our issuing this policy is the payment of Premium; in issuing the policy, we have relied upon all statements made to us in the Application and any attachments and all other information provided to us. The Application and attachments are incorporated herein and form a part of this policy.

Throughout this policy the words “you” and “your” refer to the Named Insured shown in the Declarations.

Under this policy the words “we”, “us” and “our” refer to the Underwriters providing this insurance.

The word “Insured” means any person or organization qualifying as such under WHO IS INSURED.

READ THIS POLICY CAREFULLY TO DETERMINE THE EXTENT OF COVERAGE.

IMPORTANT: THIS IS A CLAIMS FIRST MADE AND REPORTED POLICY WHICH INCLUDES COSTS OF DEFENSE WITHIN THE LIMIT OF LIABILITY.

I. COVERAGE: WHAT IS COVERED

A. We will pay Loss amounts that an Insured is legally obligated to pay on account of a Claim because of an Insured Event to which this policy applies. However, the amount we will pay is limited as described in the LIMIT OF LIABILITY and SELF INSURED RETENTION sections of this policy.

B. This policy applies only if:
   1. A Claim is first made against an Insured in accordance with WHEN COVERAGE IS PROVIDED;
   2. The Claim is reported in accordance with WHEN COVERAGE IS PROVIDED and CONDITIONS section VIII.A. Duties in the event of a Claim;
   3. A Claim is first made against an Insured in accordance with WHERE COVERAGE IS PROVIDED;
   4. The Insured Event giving rise to the Claim begins on or after the Retroactive Date as shown in the Declarations; and
   5. Prior to the inception date of this policy, or any policy of which this policy is a renewal or replacement, no officer, director, principal partner, trustee, in-house counsel or Employee with HR or risk management responsibilities had knowledge of the facts or circumstances giving rise to the Claim.
C. **Defense.** We have the right and duty to defend any **Claim** for an **Insured Event** made or brought against any Insured to which this policy applies. Our duty to defend any **Claim** ends when the **LIMIT OF LIABILITY** that applies has been exhausted and, in such event, the Named Insured shall, upon notice from us, promptly take over control of the defense.

We have the right to investigate and to settle any **Claim** for an **Insured Event** in the manner and to the extent that we believe is proper, contingent upon the consent of the Named Insured.

You may take over control of any outstanding **Claim** previously reported to us only if we both agree that you should, if required under law, or if a court orders you to do so.

You must take over control of any outstanding **Claim** if your **LIMIT OF LIABILITY** is exhausted. We will notify you of all outstanding **Claims** so that you can take over control of their defense. We will help to transfer control to you. During the transfer of control, we agree to take whatever steps are necessary to continue the defense of any outstanding **Claim** and avoid a default judgment during the transfer of control to you. If we do so, you agree to pay reasonable expenses that we incur for taking such steps after the **LIMIT OF LIABILITY** is exhausted.

D. **Duty to pay.** We have the duty to pay any **Loss** (after you pay the applicable Self-Insured Retention amount) that results from any **Claim** for an **Insured Event** made or brought against any Insured to which this policy applies. Our duty to pay ends when the applicable **LIMIT OF LIABILITY** has been exhausted. We will not pay more than the applicable **LIMIT OF LIABILITY**.

We have the duty to pay **Defense Costs** incurred (after you pay the applicable Self-Insured Retention amount) for the defense of any **Claim** that is controlled by us. Any payment of **Defense Costs** is included in the **LIMIT OF LIABILITY**, it is not in addition to the **LIMIT OF LIABILITY**.

E. **Right to Settle.** We have the right to settle any **Claim**. As respects any **Claim** for which we recommend that a settlement offer be accepted but you do not give your consent to such settlement, and the **Claim** later results in a judgment or settlement in excess of the recommended settlement, our liability for **Loss** on account of such **Claim** shall not exceed the recommended settlement amount plus **Defense Costs** incurred as of the date we recommended the settlement (after you pay the applicable Self-Insured Retention). This provision shall not apply unless the total **Loss**, including the recommended settlement, would exceed the applicable Self-Insured Retention amount.

**II. DEFINITIONS**

A. **Application** means each and every signed Application, any attachments to such Applications, other materials submitted therewith and incorporated therein and any other such documents submitted in connection with the underwriting of this policy or the underwriting of any other sexual misconduct and molestation liability policy issued by us, or any of our affiliates, of which this policy is a renewal, replacement or which succeed it in time.

B. **Claim(s)** means an oral or written complaint, or written charge made against an Insured or a written demand made against an Insured in which damages are alleged or where specific charges of **Sexual Misconduct and Molestation** are brought.
Claim includes a civil action, suit or administrative proceeding, to which any Insured must submit or to which any Insured submits with our consent.

C. **Defense Costs** means those reasonable and necessary expenses that result from the investigation, settlement or defense of a specific Claim including attorney fees and expenses, the cost of legal proceedings, the cost of appeal bonds, the cost of bonds to release property being used to secure a legal obligation (but only for bond amounts within the LIMIT OF LIABILITY that applies). We have no obligation to furnish any bonds.

The following are not Defense Costs: costs incurred by any Insured before notice is provided to us; salaries and expenses of your employees, including in-house and/or coverage attorneys, salaries and expenses of our employees, or our in-house or coverage attorneys or the fees and expenses of independent adjusters we hire.

D. **Employee** means an individual whose labor or service is engaged by and directed by the Named Insured, or any covered entity. This includes volunteers, part time, seasonal and temporary Employees as well as any individual employed in a supervisory, managerial or confidential position. Substitute teachers, student teachers, coaches, counselors and clergy are also Employees while performing activities on your behalf that you have authorized and/or sponsored. Independent contractors and sub contractors are not Employees unless they are dedicated agents or representatives of an Insured. Employees who are leased to another employer are not Employees.

E. **Insured Event** means any actual or alleged acts of Sexual Misconduct and Molestation by an Insured against any one Victim.

F. **Laundry List Notification** means any attempt by an Insured to report multiple matters under this policy in a summary fashion that does not comply with CONDITIONS section VIII. A. or B. By way of example, a Laundry List Notification may consist of a report by an Insured that lists purported potential claimants, either in the absence of a Claim or oral complaint.

G. **Loss** means damages, judgments (including prejudgment and post judgment interest awarded against an Insured on that part of any judgment paid by us), settlements, statutory attorney fees and Defense Costs.

However, Loss does not include anything specifically excluded in EXCLUSIONS: WHAT IS NOT COVERED section IX, or any of the following:
1. non-monetary relief (this provision does not apply to Defense Costs where non-monetary relief is sought for alleged Sexual Misconduct and Molestation);
2. civil or criminal fines or penalties;
3. the multiplied portion of multiplied damages, punitive or exemplary damages; and
4. matters which may be deemed uninsurable according to the law under which this policy is construed.

H. **One Insured Event** means one or more covered allegations of Sexual Misconduct and Molestation against any one victim which are related by an unbroken chain of events.

I. **Sexual Misconduct and Molestation** means actual or alleged: a) abuse, molestation, mistreatment or maltreatment of a sexual nature, including, but not limited to, any sexual involvement, sexual conduct or sexual contact, regardless of
consent; and b) negligent employment, investigation, supervision, training or retention of, or failure to report to proper authorities, a person(s) who committed any act of abuse, molestation, mistreatment or maltreatment of a sexual nature.

J. **Victim** means any individual who is the object of **Sexual Misconduct and Molestation**.

### III. WHEN COVERAGE IS PROVIDED

A. This policy applies only to Claims arising out of an Insured Event first made or brought during the Policy Period and which are reported to us in accordance with the policy’s notice provisions as set forth in **CONDITIONS** section **VIII. A. Duties in the Event of a Claim**. Claims are considered to be first made when they are first served or received by the Insured.

All **Claims** because of **One Insured Event** will be considered to have been made or brought on the date that the first of those **Claims** was first made or brought.

Limited Reporting Period means the thirty (30) day period after the policy ends, during which **Claims** because of **Insured Events** that happen or commence during the Policy Period and are reported in accordance with section **I.** and **VIII.** of the policy can be made.

B. **Extended Reporting Period**. If this policy is non-renewed or cancelled, except for non payment of premium, an Extended Reporting Period of twelve (12) months from the end of the Policy Period, or the effective date of cancellation, whichever is earlier, can be added by us issuing you an Extended Reporting Period Endorsement in exchange for your payment of an additional premium to be determined by us.

The Extended Reporting Period Endorsement will not be issued unless we receive a written request for it within thirty (30) days after this policy is cancelled or non-renewed, nor will it take effect unless the additional Premium is paid within thirty (30) days after this policy is cancelled or non-renewed. Once that Premium is paid the endorsement may not be cancelled and the additional Premium will be fully earned.

The Extended Reporting Period will not apply to any **Claim** if other insurance you buy covers you or would cover you if its limits of coverage had not been exhausted.

Coverage under the Extended Reporting Period is with respect to Claims first made against an Insured during the Policy Period or Extended Reporting Period and first reported by an Insured during the Extended Reporting Period, provided always that Claims reported during the Extended Reported Period are limited to **Insured Events** which happen or commence before the original Policy Period ends by either cancellation or non-renewal and which are otherwise covered by this policy.

The **LIMIT OF LIABILITY** that applies at the end of the Policy Period is not renewed or increased and the Limits, as shown in the Declarations, shall not be increased in any way by the Limited Reporting Period or the addition of the Extended Reporting Period.

C. If, during the Policy Period, any of the following changes occur:
   a. the acquisition of an Insured, or of all or substantially all of its assets, by another entity, or the merger or consolidation of an Insured into or with another entity such that the Insured is not the surviving entity; or
   b. the obtaining by any person, entity or affiliated group of persons or entities of the
right to elect, appoint or designate over fifty percent (50%) of the directors of an Insured
coverage under this policy with respect to such Insured will continue in full force and effect with respect to Claims for Insured Events committed before such change, but coverage with respect to such Insured will cease with respect to Claims for Insured Events committed after such change. After any such change, this policy may not be cancelled, regardless of CONDITIONS section VIII.F. Cancellation, and the entire Premium for the policy will be deemed fully earned.

IV. WHERE COVERAGE IS PROVIDED
This policy covers Claims made and Insured Events occurring anywhere in the world.

V. WHO IS INSURED
A. Individual. If you are shown in the Declarations as an individual, you and your spouse are Insureds but only for the conduct of a business of which you are the sole owner.

B. Corporation. If you are shown in the Declarations as a corporation or organization other than a partnership or joint venture, you are an Insured. Your stockholders are also Insureds, but only with respect to their liability as your stockholders.

C. Partnership or Joint Venture. If you are shown in the Declarations as a partnership or joint venture, you are an Insured. Your partners or co-venturers and their spouses are also Insureds, but only for the conduct of your business. However, no person nor organization is covered for the conduct of any current or past partnership or joint venture not named in the Declarations.

D. Other. If you are a Limited Liability Corporation (LLC), or a Limited Liability Partnership (‘LLP’) of the Named Insured and you are shown in the Declarations as ‘Other’ you are an Insured. Your members, partners and shareholders are also Insureds but only with respect to the conduct of your business.

E. Employees. Your Employees, executive officers, directors and your trustees are Insureds only for the conduct of your business within the scope of their employment. Your Employee’s status as an Insured will be determined as of the date of the Sexual Misconduct and Molestation that caused an Insured Event.

F. Subsidiary. Any organization more than 50% owned by the Named Insured and listed in the Application shall be an Insured.

G. Approved Mergers and Acquisitions. We may agree to cover certain organizations that you newly acquire or form while this policy is in effect. Written notice must be given to us within thirty (30) days after the acquisition together with such information as we may request. There may be an additional premium charged and the premium must be paid in order for coverage to take effect. Notwithstanding, in no event shall any acquired or newly formed organization be covered for Loss that results from an Insured Event that happened or first commenced before the Insured acquired or formed it; nor for any Loss covered under any other insurance.

VI. LIMIT OF LIABILITY
A. The amount shown at Item 4.a) in the Declarations is the most we will pay for Claims first made or brought during the Policy Period arising out of Sexual
Misconduct and Molestation against any one Victim regardless of: the number of acts of Sexual Misconduct and Molestation against any one Victim; the number of individuals participating in acts of Sexual Misconduct and Molestation against any one Victim; and the number of Claims.

B. The amount shown at Item 4.b) in the Declarations is the most we will pay for the combined total of all Claims first made or brought during the Policy Period. If this Policy Period is extended, the Limits, as shown in the Declarations, shall not in any way increase. For purposes of the LIMIT OF LIABILITY, any policy extension is considered to be part of and not in addition to the former Policy Period.

VII. SELF-INSURED RETENTION
Our obligation to pay under this policy applies only to the amount of Loss in excess of any Self-Insured Retention amount, as shown in the Declarations, and the LIMIT OF LIABILITY will not be reduced by the amount of such Self-Insured Retention.

The Self-Insured Retention amount will apply separately to each Claim made, however, it will only apply once to all Claims arising out of any One Insured Event.

VIII. CONDITIONS
We have no duty to provide coverage under this policy unless there has been full compliance with all the conditions contained in this policy.

A. Duties in the event of a Claim
1. You must see to it that we or our Authorized Representatives, as shown in the Declarations, are notified as soon as practicable but in no event more than thirty days (30) after the claim is made. Your notification should include:
   a. the identity of the person(s) alleging Sexual Misconduct and Molestation;
   b. the identity of any Insured(s) who allegedly committed Sexual Misconduct and Molestation;
   c. the identity of any witnesses to the alleged Sexual Misconduct and Molestation; and
   d. the date(s) an Insured Event took place.
2. You and any other Insured must:
   a. immediately send us or our Authorized Representatives, as shown in the Declarations, copies of any demands, notices, summonses or legal papers received in connection with the Claim;
   b. authorize us or our Authorized Representatives, as shown in the Declarations, to obtain statements, records and other information;
   c. co-operate with us or our Authorized Representatives, as shown in the Declarations, in the investigation or defense of the Claim; and
   d. assist us or our Authorized Representatives, as shown in the Declarations, in the enforcement of any right against any person or organization which may be liable to an Insured because of Loss to which this policy may also apply.
3. No Insured will, except at their own cost, voluntarily make a payment, assume any obligation, or incur any expense without our consent. Subsequent payments that are deemed by us as having been prejudiced by any such voluntary payment will also be the sole responsibility of the Insured.

B. Report of a Potential Claim
Solely at an Insured’s option, an Insured may within the Policy Period report incidents of Sexual Misconduct and Molestation that may reasonably be
expected to give rise to a **Claim**. If such report is received our Authorized Representatives, as shown in the Declarations, within the Policy Period then any **Claim** subsequently arising from such incidents will be deemed to be made on the date such report was received. Such report must include the identity of the person(s) involved, along with a description of the **Sexual Misconduct and Molestation**. In no event, however, is an Insured entitled to coverage under this policy based on a **Laundry List Notification**.

C. Legal Action Against Us
1. No person or organization has the right under this policy:
   a. to join us as a party or otherwise bring us into a suit asking for damages from an Insured; or
   b. to sue us on this policy unless all of its terms have been fully complied with.
2. A person or organization may sue us to recover on an agreed settlement or on final judgment against an Insured obtained after an actual trial, but we 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 LIABILITY. An agreed settlement means a settlement and release of liability signed by us, an Insured and the claimant’s legal representative.

D. Other Insurance
If other valid and collectable insurance is available to an Insured covering a **Loss** also covered by this policy, other than insurance that is specifically stated to be in excess of this policy, the insurance afforded by this policy shall be in excess of and shall not contribute with such other insurance. Nothing herein shall be construed to make this policy subject to the term, conditions and limitations of any other insurance.

E. Premium
1. The Premium shown in the Declarations is for the Policy Period shown in the Declarations.
2. This policy is subject to a minimum earned Premium of twenty five percent (25%) of the total Premium shown in the Declarations.

F. Cancellation
You may cancel this policy by mailing to us written notice stating when, not less than thirty (30) days thereafter, such cancellation shall be effective. We may cancel this policy by mailing to the Named Insured at the address shown in the Declarations, written notice stating when, not less than thirty (30) days thereafter, such cancellation shall be effective. We may cancel this policy for non-payment of Premium by mailing to the Named Insured at the address shown in the Declarations, written notice stating when, not less than ten (10) days thereafter, such cancellation shall be effective. The mailing of notice as aforesaid shall be sufficient proof of notice. The effective date and hour of cancellation as stated in the notice shall become the end of the Policy Period. Delivery of such written notice shall be equivalent to mailing.

If you cancel, earned Premium shall be computed in accordance with the short rate table and procedures shown in **SHORT RATE TABLE AND PROCEDURES**. The Premium shall be deemed fully earned if any **Claim** is made, or any Potential Claim under Section VIII.B is reported to us, on or before the date of cancellation of this policy. If we cancel, earned Premium shall be computed pro rata. Premium adjustment may be made at the time cancellation becomes effective, but payment or tender of unearned Premium is not a condition of cancellation.
G. Representations
By accepting this policy you agree:
1. all statements in the Application and any attachments as well as all other information provided to us are accurate and complete;
2. those statements are based upon representations you made to us;
3. we have issued this policy in reliance upon your representations; and
4. to disclose any material facts you become aware of between the time that the Application for this policy is signed and the policy inception date.

H. When We Do Not Renew
If we decide not to renew this policy, we will mail or deliver to the Named Insured shown in the Declarations, written notice of the non-renewal not less than sixty (60) days before the expiration date.
If notice is mailed, proof of mailing will be sufficient notice of non-renewal.

I. Transfer Of Rights Of Recovery Against Others to Us
If any Insured has rights to recover all or part of any payments we have made under this policy, those rights are transferred to us; the Insured must do nothing after a Loss to impair them. At our request, any Insured will bring suit or transfer those rights to us and help us to enforce them.

J. Bankruptcy
Bankruptcy or insolvency of any Insured or of an Insured’s estate will not relieve us of our obligations under this policy, except as excluded in EXCLUSIONS: WHAT IS NOT COVERED section IX.

K. False Or Fraudulent Claims
If any Insured shall proffer any Claim knowing the same to be false or fraudulent as regards amount or otherwise, this policy will become void in its entirety and all coverage hereunder shall be forfeited.

IX. EXCLUSIONS: WHAT IS NOT COVERED
A. By an Insured. This policy does not cover any Loss arising out of any Claim by one Insured or more under this insurance against another Insured under this insurance.

B. Employment Practices. This policy does not cover Loss arising out of any Claim based upon or alleging any employment-related practice, policy, act, or omission, even if Sexual Misconduct and Molestation is involved; provided, however, this exclusion shall not apply to allegations of negligent employment, investigation, supervision, training or retention of, or failure to report to proper authorities, a person(s) who committed an act of Sexual Misconduct and Molestation.

C. Perpetrator. This policy will not provide coverage to any individual Insured who personally commits, participates in, or assists in any act of Sexual Misconduct and Molestation as defined in DEFINITIONS section II.1(a). Without limiting the foregoing, we will afford the defense to which such individual Insured would be otherwise entitled until such time as: 1) that individual Insured is judicially determined to have committed, participated in or assisted in any act of Sexual Misconduct and Molestation; or 2) that individual Insured admits in any context to having committed, participated in or assisted in any act of Sexual Misconduct and Molestation.

D. Knowledge of Perpetrator. This policy does not cover any Loss arising out of any Claim if, prior to the date of the Insured Event giving rise to the Claim, any
Insured was aware of any allegation or complaint of Sexual Misconduct and Molestation as defined in DEFINITIONS section II.1(a) made against the same individual(s) as accused in the Claim.

E. Outside Activities. This policy does not cover Loss for any Claim arising out of any Insured's activities as a trustee, partner, officer, director or employee of any employee trust, charitable organization, corporation, or company or business other than that of the Named Insured.

F. Worker's Compensation. This policy does not cover any Loss arising out of any Claim alleging violation of any worker's compensation, disability benefits or unemployment compensation law, social security and other employment benefit law, or any similar law.

G. Contractual Liability. This policy does not cover any Loss based upon, arising out of, directly or indirectly in connection with, related to, or in any way involving any Claim that Insured is obligated to pay by reason of the assumption of another's liability for an Insured Event under a contract or agreement. This exclusion will not apply to liability for damages because of an Insured Event that any Insured would have without the contract or agreement.

H. Employee Retirement Income Security Act. This policy does not cover any Loss arising out of any Claim alleging violation of the Employee Retirement Income Security Act of 1974 Public Law 93-406, or any amendments thereto, or any similar federal, state or local law, rule or regulation.

I. Consequential Loss. This policy does not cover any Loss resulting from or attributable to any allegations made by or solely for the benefit of a claimant's domestic partner, spouse, child, parent, brother or sister.

J. Fraud and Collusion. This policy does not cover any Loss based upon, arising out of, directly or indirectly in connection with, related to, or in any way involving any Claim alleging fraud or collusion by an Insured. Without limiting the foregoing, we will pay Defense Costs incurred in defense of allegations of fraud and collusion against an innocent Insured named in such Claim so long as such Claim also contains allegations against that innocent Insured otherwise involving an Insured Event.

K. Prior Notice. This policy does not cover any Loss arising out of Insured Events that have been the subject of any notice given under any other policy in force prior to the inception date of this policy.

L. Insolvency. This policy does not cover any Loss arising out of Insured Events occurring on or after the effective date:
   1. of the appointment of a receiver, conservator, liquidator, trustee, rehabilitator, or similar official to take control of, supervise, monitor, manage or liquidate an Insured; or
   2. that any governmental agency, body or representative assumes control, or takes over the management and/or operations of an Insured.
X. SHORT RATE TABLE AND PROCEDURES

NOTWITHSTANDING anything to the contrary contained herein and in consideration of the Premium for which this insurance is written it is agreed that in the event of cancellation thereof by an Insured the earned Premium shall be computed as follows:

SHORT RATE CANCELLATION TABLE

A. For insurance written for one year:

<table>
<thead>
<tr>
<th>Days Insurance in force</th>
<th>Percentage of one Year Premium</th>
<th>Days Insurance in force</th>
<th>Percentage of one Year Premium</th>
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<tr>
<td>1-54</td>
<td>25</td>
<td>192-196</td>
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<td>55-58</td>
<td>26</td>
<td>197-200</td>
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<td>59-62 (2 months)</td>
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<td>201-205</td>
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<td>63-65</td>
<td>28</td>
<td>206-209</td>
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<td>66-69</td>
<td>29</td>
<td>210-214 (7 months)</td>
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<td>70-73</td>
<td>30</td>
<td>215-218</td>
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<td>74-76</td>
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<td>219-223</td>
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<td>77-80</td>
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<td>224-228</td>
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<td>81-83</td>
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<td>229-232</td>
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<td>84-87</td>
<td>34</td>
<td>233-237</td>
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<td>88-91 (3 months)</td>
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<td>238-241</td>
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<td>92-94</td>
<td>36</td>
<td>242-246 (8 months)</td>
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<td>95-98</td>
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<td>247-250</td>
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<td>265-269</td>
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<td>114-116</td>
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<td>270-273 (9 months)</td>
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<td>117-120</td>
<td>43</td>
<td>274-278</td>
<td>81</td>
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<td>121-124 (4 months)</td>
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<td>279-282</td>
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<td>125-127</td>
<td>45</td>
<td>283-287</td>
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<td>128-131</td>
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<td>288-291</td>
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<td>297-301</td>
<td>86</td>
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<td>139-142</td>
<td>49</td>
<td>302-305 (10 months)</td>
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<td>143-146</td>
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<td>306-310</td>
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<td>147-149</td>
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<td>311-314</td>
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<td>150-153 (5 months)</td>
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<td>315-319</td>
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<td>329-332</td>
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<td>165-167</td>
<td>56</td>
<td>333-337 (11 months)</td>
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<td>168-171</td>
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<td>338-342</td>
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<td>176-178</td>
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<td>347-351</td>
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<td>179-182 (6 months)</td>
<td>60</td>
<td>352-355</td>
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<td>183-187</td>
<td>61</td>
<td>356-360</td>
<td>99</td>
</tr>
<tr>
<td>188-191</td>
<td>62</td>
<td>361-365 (12 months)</td>
<td>100</td>
</tr>
</tbody>
</table>
B. For insurances written for more or less than one year:
   1. If insurance has been in force for 12 months or less, apply the standard short rate table for annual insurances to the full annual Premium determined as for an insurance written for a term of one year.
   2. If insurance has been in force for more than 12 months;
      a) Determine full annual Premium as for an insurance written for a term of one year.
      b) Deduct such Premium from the full insurance Premium, and on the remainder calculate the pro-rata earned Premium on the basis of the ratio of the length of time beyond one year the insurance has been in force to the length of time beyond one year for which the insurance was originally written.
      c) Add Premium produced in accordance with items a) and b) to obtain earned Premium during full period insurance has been in force.
DECLARATIONS

SEXUAL MISCONDUCT AND MOLESTATION INSURANCE
CLAIMS FIRST MADE AND REPORTED

Insurance is provided by: Various Insurers as per Schedule attached.

Policy Number:

1. NAMED INSURED: NOTICE: This is a Claims First Made and Reported Policy. Please read this policy carefully and discuss the coverage with your insurance agent. The Application Form and attachments are hereby attached and made a part of this policy.

(   ) Individual     (   ) Partnership     (   ) Corporation     (   ) Joint Venture     (   ) Other

2. POLICY PERIOD: at 12:01AM. (Standard Time at YOUR address shown below).

3. ADDRESS:

4. LIMIT OF LIABILITY (INCLUDES COST OF DEFENSE):
   a) Each Victim Limit ______
   b) Aggregate Limit of Liability ______

5. SELF-INSURED RETENTION (INCLUDES COST OF DEFENSE):
   Any One Victim ____________

6. RETROACTIVE DATE:

7. PREMIUM:

8. AUTHORIZED REPRESENTATIVES:

Please quote following reference when dealing with our Authorised Representatives: