



ALLIANCE OF NONPROFITS FOR INSURANCE
 RISK RETENTION GROUP
 P.O. Box 8546, Santa Cruz, CA 95061
 P: (800) 359-6422
 F: (831) 459-0853

SCHEDULE NI

POLICY NUMBER: 2013-26938

THE NAMED INSURED IS AS FOLLOWS:

East Phillips Improvement Coalition Inc., Audubon Neighborhood Association, Bryant Neighborhood Organization, Central Area Neighborhood Development Organization, Citizens for a Loring Park Community, Corcoran Neighborhood Organization, Elliot Park Neighborhood, Inc., Field, Regina, Northrop Neighborhood Group, Heritage Park Neighborhood Association, Holland Neighborhood Improvement Association, Jordan Area Community Council, Kingfield Neighborhood Association, Logan Park Neighborhood Association, Longellow Community Council, Midtown Phillips Neighborhood Association, Northside Residents Redevelopment Council, Powderhorn Park Neighborhood Association, Seward Neighborhood Group, St. Anthony East Neighborhood Association, Windom Park Citizens in Action, Cleveland Neighborhood Association, East Harriet Farmstead Neighborhood Association, Betrami Neighborhood Council

07/10/2013

BY

(AUTHORIZED REPRESENTATIVE)

"NOTICE : This Policy is issued by your risk retention group. Your risk retention group may not be subject to the insurance laws and regulations of your State. State insurance insolvency guaranty funds are not available for your risk retention group."



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COMMERCIAL LINES COMMON POLICY DECLARATIONS

PRODUCER:
 Nonprofit Insurance Advisors
 2314 University Ave W Suite 20
 Saint Paul, MN 55114

POLICY NUMBER: **2013-26938**
 RENEWAL OF NUMBER: **2012-26938**

NAME OF INSURED AND MAILING ADDRESS:

East Phillips Improvement Coalition, Inc.*
 821 E. 35th Street
 Minneapolis, MN 55407

SEE SCHEDULE NI FOR FULL NAMED INSURED

POLICY PERIOD: FROM **07/08/2013** TO **07/08/2014**
 AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Revitalizes neighborhoods in Minneapolis

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
 POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THESE PREMIUMS MAY BE SUBJECT TO ADJUSTMENT.

	PREMIUM
COMMERCIAL GENERAL LIABILITY COVERAGE PART - OCCURRENCE	\$9,902
COMMERCIAL AUTO LIABILITY COVERAGE PART	\$600
IMPROPER SEXUAL CONDUCT COVERAGE PART	Not Covered
COMMERCIAL LIQUOR LIABILITY COVERAGE PART	INCLUDED
TERRORISM COVERAGE (Certified Acts)	\$42
TOTAL:	\$10,544

FORM(S) AND ENDORSEMENT(S) MADE A PART OF THIS POLICY AT TIME OF ISSUE:*

- | | | | | | | |
|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| ANI-RRG-AL 04 01, | ANI-RRG-E03 01 13, | ANI-RRG-E11 07 92, | ANI-RRG-E12 05 92, | ANI-RRG-E15 02 09, | ANI-RRG-E22 08 95, | ANI-RRG-E25 01 98, |
| ANI-RRG-E28 01 99, | ANI-RRG-E29 12 09, | ANI-RRG-E33 01 02, | ANI-RRG-E42 07 06, | ANI-RRG-E52 09 11, | ANI-RRG-E60 07 12, | ANI-RRG-E61 02 13, |
| ANI-RRG-E7 10 04, | ANI-RRG-GL 04 01, | ANI-RRG-LL 04 01, | ANI-RRG-X1 08 02, | CG 00 01 07 98, | CG 00 33 01 96, | CG 00 67 03 05, |
| CG 01 22 07 98, | CG 20 10 07 04, | CG 20 11 01 96, | CG 20 12 07 98, | CG 20 18 11 85, | CG 20 20 11 85, | CG 20 21 07 98, |
| CG 20 26 07 04, | CG 20 34 07 04, | CG 20 37 07 04, | CG 21 16 07 98, | CG 21 70 01 08, | CG 22 44 11 85, | CG 24 07 11 85, |
| CG 25 04 11 85, | CG 26 05 02 07, | CG 29 97 02 07, | CG 77 94 04 93, | IL 00 17 11 98, | IL 02 45 09 07, | IL 09 85 01 08, |
| NPO-001 04 09, | SCHEDULE BA 01 80, | SCHEDULE G 01 80, | SCHEDULE L 01 80, | SCHEDULE NI 01 80, | | |

*Omits applicable forms and endorsement if shown in specific coverage part / coverage form declarations.

These declarations and the common policy declarations, if applicable, together with the common policy conditions, coverage form(s) and forms and endorsements, if any, issued to form a part thereof, complete the above numbered policy.

"NOTICE

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BY

(AUTHORIZED REPRESENTATIVE)
 07/10/2013



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 RISK RETENTION GROUP
 P.O. Box 8546, Santa Cruz, CA 95061
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COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

PRODUCER:
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LIMITS OF COVERAGE:

GENERAL AGGREGATE LIMIT (OTHER THAN PRODUCTS - COMPLETED OPERATIONS)	\$2,000,000
PRODUCTS - COMPLETED OPERATIONS AGGREGATE LIMIT	\$2,000,000
PERSONAL AND ADVERTISING INJURY LIMIT	\$1,000,000
EACH OCCURRENCE LIMIT	\$1,000,000
DAMAGE TO PREMISES RENTED TO YOU	\$500,000 any one premise
MEDICAL EXPENSE LIMIT	20,000 any one person

ADDITIONAL COVERAGES:

SOCIAL SERVICE PROFESSIONAL LIABILITY EXCLUDED

CLASSIFICATION(S) SEE ATTACHED SUPPLEMENTAL DECLARATIONS SCHEDULE G

PREMIUM **\$9,902**

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY ARE INCLUDED IN COMMERCIAL LINES COMMON POLICY DECLARATIONS

07/10/2013

BY

Samuel C. Ad.

(AUTHORIZED REPRESENTATIVE)

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

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ANI - RRG - GL

(03437)



ALLIANCE OF NONPROFITS FOR INSURANCE
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**COMMERCIAL GENERAL LIABILITY
 EXTENSION OF DECLARATIONS**

Schedule G

POLICY NUMBER: 2013-26938

Page 1

NAME OF INSURED: East Phillips Improvement Coalition, Inc.*

SEE SCHEDULE NI FOR FULL NAMED INSURED

<u>PREMISES CODE/CLASS</u>	<u>*LOC</u>	<u>PREMIUM BASIS</u>	<u>RATE</u>	<u>*ADVANCED PREMIUM</u>
61227/Buildings or Premises - office - NFP	1	1,580	112.901	\$178

ADDITIONAL COVERAGES

FREE TEXT

*See Common Declarations for Total Advanced Premium and Schedule 'L' for locations.

07/10/2013

BY *Pamela C. D.*

(AUTHORIZED REPRESENTATIVE)

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**COMMERCIAL GENERAL LIABILITY
 EXTENSION OF DECLARATIONS**

Schedule G

POLICY NUMBER: 2013-26938

Page 2

NAME OF INSURED: East Phillips Improvement Coalition, Inc.*

SEE SCHEDULE NI FOR FULL NAMED INSURED

<u>PREMISES CODE/CLASS</u>	<u>*LOC</u>	<u>PREMIUM BASIS</u>	<u>RATE</u>	<u>*ADVANCED PREMIUM</u>
GL coverage for the business operations and activities associated with the East Phillips Improvement Coalition programs - organizations listed below Premium charge of \$400 per organization:				\$9,224
Audubon Neighborhood Association				
Bryant Neighborhood Organization				
Central Area Neighborhood Development Organization				
Citizens for a Loring Park Community				
Corcoran Neighborhood Organization				
Elliot Park Neighborhood, Inc.				
Field, Regina, Northrop Neighborhood Group				
Heritage Park Neighborhood Association				
Holland Neighborhood Improvement Association				
Jordan Area Commnuity Council				
Kingfield Nieghborhood Assocation				
Logan Park Neighborhood Association				
Longellow Community Council				
Midtown Phillips Neighborhood Association				
Northside Residents Redevelopment Council				
Powderhorn Park Neighborhood Assocation				
Seward Neighborhood Group				
St. Anthony East Neighborhood Assocation				
Windom Park Citizens in Action				
Cleveland Neighborhood Association				
East Harriet Farmstead Neighborhood Association				
Beltrami Neighborhood Council				
Increased Aggregate				\$500

*See Common Declarations for Total Advanced Premium and Schedule 'L' for locations.

07/10/2013

BY

Pamela C. D.

(AUTHORIZED REPRESENTATIVE)

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**COMMERCIAL GENERAL LIABILITY
 EXTENSION OF DECLARATIONS**

Schedule L

POLICY NUMBER: 2013-26938

Page 1

NAME OF INSURED: East Phillips Improvement Coalition, Inc.*

SEE SCHEDULE NI FOR FULL NAMED INSURED

<u>PREMISES LOC/BLDG</u>	<u>DESIGNATED PREMISES ADDRESS, CITY, STATE, ZIP</u>	<u>ADDITIONAL INSUREDS AND OTHER INTERESTS</u>
1	331 2nd Ave. S Room 220, Ste 425 Minneapolis, MN 55401	

07/10/2013

BY

(AUTHORIZED REPRESENTATIVE)

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COMMERCIAL LIQUOR LIABILITY COVERAGE PART DECLARATIONS

PRODUCER:

Nonprofit Insurance Advisors
 2314 University Ave W Suite 20
 Saint Paul, MN 55114

POLICY NUMBER: 2013-26938
 RENEWAL OF NUMBER: 2012-26938

NAME OF INSURED AND MAILING ADDRESS:

East Phillips Improvement Coalition, Inc.*
 821 E. 35th Street
 Minneapolis, MN 55407

***SEE SCHEDULE NI FOR FULL NAMED INSURED**

POLICY PERIOD:

FROM 07/08/2013 TO 07/08/2014
 AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Revitalizes neighborhoods in Minneapolis

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

LIMITS OF COVERAGE:

GENERAL AGGREGATE LIMIT.....	\$ 1,000,000
EACH COMMON CAUSE LIMIT.....	\$ 1,000,000

PREMIUM:	Included
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FORMS AND ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT THE TIME OF ISSUANCE:
 CG 00 33/01 96

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

07/10/2013

BY

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NAME OF INSURED: East Phillips Improvement Coalition, Inc.*
*SEE SCHEDULE NI FOR FULL NAMED INSURED

Page 1

LIABILITY FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Business Auto Coverage Part Declarations	ANI-RRG-AL 04 01
Member Criteria	ANI-RRG-E03 01 13
Fireworks Exclusion	ANI-RRG-E11 07 92
Nuclear Energy Liability Exclusion Endorsement	ANI-RRG-E12 05 92
Blood Testing Exclusion	ANI-RRG-E15 02 09
Asbestos Exclusion	ANI-RRG-E22 08 95
Additional Insured - Designated Person or Organization	ANI-RRG-E25 01 98
Property Damage to Personal Property in the Care, Custody or Control of the Insured	ANI-RRG-E28 01 99
Employee Personal Auto Reimbursement	ANI-RRG-E29 12 09
Mold, Fungus Exclusion	ANI-RRG-E33 01 02
Nuclear, Chemical and Biological Hazard Exclusion	ANI-RRG-E42 07 06
Cyber Coverage	ANI-RRG-E52 09 11
Volunteer Medical Payments	ANI-RRG-E60 07 12
Additional Insured - Primary and Non-Contributory Endorsement for Public Entities	ANI-RRG-E61 02 13
Exclusion of Coverage for Claims By and Related to Past and Present Employees	ANI-RRG-E7 10 04
Commercial General Liability Coverage Part Declarations	ANI-RRG-GL 04 01
Commercial Liquor Liability Coverage Part Declarations	ANI-RRG-LL 04 01
Improper Sexual Conduct Exclusion - GL	ANI-RRG-X1 08 02
Commercial General Liability Coverage Form	CG 00 01 07 98
Liquor Liability Coverage Form	CG 00 33 01 96
Exclusion - Violation of Email Statutes	CG 00 67 03 05
Minnesota Changes - Contractual Liability Exclusion And Supplementary Payments	CG 01 22 07 98
Additional Insured - Owners, Lessees or Contractors	CG 20 10 07 04
Additional Insured - Managers or Lessors of Premises	CG 20 11 01 96
Additional Insured - State or Political Subdivisions - Permits	CG 20 12 07 98
Additional Insured - Mortgagee, Assignee or Receiver	CG 20 18 11 85
Additional Insured - Charitable Institutions	CG 20 20 11 85
Additional Insured - Volunteers	CG 20 21 07 98
Additional Insured - Designated Person or Organization	CG 20 26 07 04
Additional Insured - Lessor of Leased Equipment - Automatic Status - Lease	CG 20 34 07 04
Additional Insured - Owners, Lessees or Contractors - Completed Operations	CG 20 37 07 04
Designated Professional Services Exclusion	CG 21 16 07 98
Cap on Losses from Certified Acts of Terrorism	CG 21 70 01 08
Health or Cosmetic Services Exclusion	CG 22 44 11 85
Products/Completed Operations Hazard Redefined	CG 24 07 11 85
Amendment - Aggregate Limits of Insurance (Per Location)	CG 25 04 11 85
Minnesota Changes	CG 26 05 02 07
Minnesota Changes - Liquor Liability	CG 29 97 02 07
Liability Arising Out of Lead Exclusion	CG 77 94 04 93
Common Policy Conditions	IL 00 17 11 98
Minnesota Changes - Cancellation and Nonrenewal	IL 02 45 09 07
Disclosure Pursuant to Terrorism Risk Insurance Act	IL 09 85 01 08
Nonprofits' OWN Enhancement Endorsement	NPO-001 04 09
Business Auto Coverage Schedule	SCHEDULE BA 01 80
Commercial General Liability Class Code Schedule	SCHEDULE G 01 80

This list of forms is not part of the actual policy, but is for your information only.
Please refer to the policy(s) for actual limits, coverages and exclusions.



INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2013-26938

NAME OF INSURED: East Phillips Improvement Coalition, Inc.*
*SEE SCHEDULE NI FOR FULL NAMED INSURED

Page 2

LIABILITY FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Commercial General Liability Location Schedule
Schedule NI - GL

SCHEDULE L 01 80
SCHEDULE NI 01 80

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BUSINESS AUTO COVERAGE PART DECLARATIONS

PRODUCER: Nonprofit Insurance Advisors
 2314 University Ave W Suite 20
 Saint Paul, MN 55114

POLICY NUMBER: 2013-26938
 RENEWAL OF NUMBER: 2012-26938

Item One: NAME OF INSURED AND MAILING ADDRESS:

East Phillips Improvement Coalition, Inc.*
 821 E. 35th Street
 Minneapolis, MN 55407

***SEE SCHEDULE NI FOR FULL NAMED INSURED**

POLICY PERIOD: FROM 07/08/2013 TO 07/08/2014
 AT 12:01 A.M. STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

BUSINESS DESCRIPTION: Revitalizes neighborhoods in Minneapolis

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS
 POLICY, WE AGREE WITH YOU TO PROVIDE THE COVERAGE AS STATED IN THIS POLICY.

Item Two: SCHEDULE OF COVERAGES AND COVERED AUTOS.

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS <small>Entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form shows which autos are covered autos.</small>	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
LIABILITY CSL	N/A	EXCLUDED	N/A
PERSONAL INJURY PROTECTION (or equivalent No-fault Coverage)	N/A	SEPARATELY STATED IN EACH P.I.P. ENDORSEMENT.	N/A
ADDED PERSONAL INJURY PROTECTION (or equivalent added No-fault Coverage)	N/A	SEPARATELY STATED IN EACH P.I.P. ENDORSEMENT.	N/A
HIRED AUTO	8	\$1,000,000 CSL	\$100
NONOWNED AUTO	9	INCLUDED	\$500
AUTO MEDICAL PAYMENTS	N/A	EXCLUDED	N/A
UNINSURED MOTORIST	N/A	EXCLUDED	N/A
UNDERINSURED MOTORIST	N/A	EXCLUDED	N/A
PHYSICAL DAMAGE COMPREHENSIVE/ COLLISION	N/A	N/A	N/A
ESTIMATED TOTAL PREMIUM			\$600

FORMS AND ENDORSEMENTS APPLICABLE TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT THE TIME OF ISSUANCE:
 CA 00 01 03 10, CA 01 38 02 07, CA 02 18 06 00, CA 20 54 10 01, CA 20 55 10 01, CA 99 33 02 99, CA 99 34 12 93,

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

07/10/2013

BY

Panel C. Q.

(AUTHORIZED REPRESENTATIVE)

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ANI - RRG - AL

(03437)



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BUSINESS AUTO COVERAGE FORM

POLICY NUMBER: 2013-26938

SCHEDULE BA
 Page 1

NAME INSURED: East Phillips Improvement Coalition, Inc.*

SEE SCHEDULE NI FOR FULL NAMED INSURED

Item Three: SCHEDULE OF COVERED AUTOS YOU OWN

DESCRIPTION			TERR. STATE	CLASS CODE	DEDUCTIBLES apply only if coverage is provided as indicated below.	
COVERED AUTO NO.	YEAR, MODEL, TRADE NAME, BODYTYPE, SERIAL NUMBER(S)	VIN			OTHER THAN COLLISION	COLLISION

NO OWNED AUTOS

PREMIUMS: COVERAGE IS PROVIDED ONLY IF A PREMIUM CHARGE IS INDICATED.

COVERED AUTO NO.	NON-OWNED	HIRED	LIABILITY	PIP	MED PAY	UM/UIM	PHYSICAL DAMAGE		ADDITIONAL INSURED / LOSS PAYEE: <small>Except for towing, all physical damage loss is payable to you and the Loss Payee named below as interest may appear at the time of loss. See attached Schedule A1.</small>
							COLL.	COMP.	

NO/H 500 100

Samuel C. R.

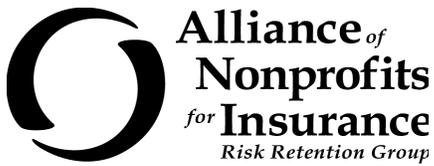
07/10/2013

(AUTHORIZED REPRESENTATIVE)

Date

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ANI - RRG - SCHEDULE BA



INDEX OF FORMS ATTACHED TO THE POLICY

POLICY NUMBER: 2013-26938

NAME OF INSURED: East Phillips Improvement Coalition, Inc.*

Page 1

*SEE SCHEDULE NI FOR FULL NAMED INSURED

AUTO FORMS AND ENDORSEMENTS

FORM NUMBER/EDITION DATE

Business Auto Coverage Form	CA 00 01 03 10
Minnesota Changes	CA 01 38 02 07
Minnesota Changes - Cancellation and Nonrenewal	CA 02 18 06 00
Employee Hired Autos	CA 20 54 10 01
Fellow Employee Coverage	CA 20 55 10 01
Employees as Insureds	CA 99 33 02 99
Social Service Agencies - Volunteers as Insureds	CA 99 34 12 93

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