

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/01/2015

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 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(les) must be endorsed. If SUIROGATION 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).

	ertificate holder in lieu of such endor	rsem	ent(s)			***				_			
1.000	DDUCER				CONTA NAME:	JUY OIIV							
Joy Olivier Insurance Agency, Inc 2155 Las Positas Ct, Ste S						PHONE (A/C, No, Ext): (925)373-6852 FAX (A/C, No): (925)369-0329							
The second secon					E-MAIL ADDRESS: joy@joyolivierinsurance.com								
Livermore, CA 94551						INSURER(S) AFFORDING COVERAGE NAIC #							
						INSURER A: Covington Specialty Insurance Company							
INSURED						INSURER B: Nautilus Insurance Company							
Ellen Hoke						INSURER C:							
25163 Campus Dr						RD:							
Hayward, CA 94542						INSURER E :							
00//774070						INSURER F:							
COVERAGES CERTIFICATE NUMBER:  THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE INDICATED. NOTWITHSTANDING ANY PROLUBEMENT, TEXA OR CONDITION.								REVISION NUMBER:					
C E	ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	PERT POLI	AIN, CIES.	THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF ANY	CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC					
INSR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF	POLICY EXP (MM/DD/YYYY)	LIMITS					
	GENERAL LIABILITY					(many port 1 1 1)	(MIN/DD/1111)		\$	1,000,000			
	X COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED	\$	100,000			
	CLAIMS-MADE X OCCUR						08/01/2016	The state of the s	\$	5,000			
Α		Y		VBA 219410 00		08/01/2015			\$	1,000,000			
			1 1						3	2,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:								\$	1,000,000			
	POLICY PRO- JECT LOC			,					\$				
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	s				
	ANY AUTO ALL OWNED SCHEDULED								\$				
	AUTOS AUTOS NON-OWNED					1		BODILY INJURY (Per accident)	\$				
	HIRED AUTOS AUTOS							PROPERTY DAMAGE (Per accident)	\$				
	X IIIII DELLA LILIA								\$				
В	X UMBRELLA LIAB OCCUR X EXCESS LIAB CLAUGO MADE							EACH ()CCURRENCE	\$	1,000,000			
Ь	CLAIMS-MAUE	Y		1539313B		08/01/2015	08/01/2016	AGGRE GATE	5	1,000,000			
_	DED RETENTION \$ WORKERS COMPENSATION								\$				
	AND EMPLOYERS' LIABILITY							WC STATU- TCRY LIMITS ER					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	N/A	- 1					E.L. EACH ACCIDENT	5				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DIS EASE - EA EMPLOYEE S	3				
	DESCRIPTION OF OPERATIONS EGIOW		_					E.L. DISEASE - POLICY LIMIT	5				
Α	Prof Liability - Errors & Omissions inc: Sexual Molestation & Abuse	Α		VBA :219410 00	08/01/2015 08/01/2016 \$1 Million each occurrance \$2 Million Aggregate				:Ө				
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	ltach A	CORD 101, Additional Remarks S	chedule, l	If more space is	required)						
ADI	DITIONAL INSURED: Mt. Diablo Unified Consultant/Named Insured. Endorseme	Scho	ol Di	strict is named additional in	nsured v	vith respect t	o liability aris	ing out of work or operation	ns perf	ormed by			
				3									
CER	TIFICATE HOLDER				CANCE	ELLATION							
	Mt. Diablo Unified School Dist 1936 Carlotta Drive Concord, CA 94519-1397	rict			SHOU THE ACCO	LD ANY OF T	H THE POLICY	ESCRIBED POLICIES BE CAI REOF, NOTICE WILL BE Y PROVISIONS.	NCELLI E DEL	ED BEFORE IVERED IN			
\CO	RD 25 (2010/05)				Va	ay &	2. A.C	Peri					
	(2010/00)	Th			1	/ © 198	8-2010 ACC	ORD CORPORATION. A	II right	s reserved.			

The ACORD name and logo are registered marks of ACORD

### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

## ADDITIONAL INSURED - CONTROLLING INTEREST

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

#### **SCHEDULE**

#### Name of Person or Organization:

Mt. Diablo Unified School District 1936 Carlotta Drive Concord, CA 94519-1397

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

- 1. WHO IS AN INSURED (Section II) is amended to include as an insured the person(s) or organization(s) shown in the Schedule, but only with respect to their liability arising out of:
- a. Their financial control of you; or
- b. Premises they own, maintain or control while you lease or occupy these premises.
- 2. This insurance does not apply to structural alterations, new construction and demolition operations performed by or for that person or organization.



#### **CSAA Insurance Exchange** P.O.Box 22221 Oakland, CA 94623-2221

# Automobile Policy Declarations Please keep with your policy See Important Notice on reverse



For questions or changes call: (800) 922-8228

Page 1 of 1

1. Name and Address of Insured

գիոցյելժիլեմեկրինկյիլիներվութիւնիկութուն KENNETH A HOKE ELLEN HOKE 25163 CAMPUS DR HAYWARD CA 94542-1117

Policy Number	CAAS100025134		logned			
	CAASTOOCESTST	Sirce	1993			
Your Policy	From		Standard Time at the address of the			
	07-30-2015	for or if this is a replacement declarations, not prior to the time coverage change was requested				
Period	To	12.01 A.M. Standard Time at the address of the				
	Policy:	Your 07-30-2015	Name   Name	Note: 07-30-2015 Named Insured, but not prifer or if this is a replacement for the time coverage in the time coverage. To 12.01 A.M. Standard Time		

tuenute AAkers Occupation Sales It			Attenute Number Telephone Number (510) 537-3395								
1 VOLKSWAGEN 2 CHEVROLET 3 KIA 4 BMW	2012 SEDA 2012 COUI 2012 SEDA	Model Yr Body Tyre 2012 SEDAN 4 DOOR 2012 COUPE 2012 SEDAN 4 DOOR			Vehicle Membration No WVWMP7AN6CE532005 2G1FA1F3XC9126109 KNAFT4A22C5599206 WBADM6349YGU12389					3335	
Coverage		Liability Limits  Each Person Lisch Occurrence			Deduct ble	Premium	Beta 3  Deductible Fremeum		item 4 Doductible Premum		
Bodily Injury	1,000,000	1,000,000	Deductible	\$159		\$158		\$159		\$142	
Medical Payments	No Coverage	N N =	No Co	rerage	e No Coverac		No Coverage		No Coverage		
Uninsured Motorists	100,000	300,000		\$50 \$135		\$54	\$50			\$54	
Property Damage		1,000,000				\$130		\$135		\$106	
Comprehensive Actual	L Cash Value Less Dec	l luctible	250	\$92	250	\$122	250	<b>\$</b> 75	250	\$143	
SECONOMICOLD HUSIN METERS OF	Cash Value Less Dec		250	\$375	250	\$377	250	\$335	250	\$393	
Enhanced Transportation Expense				\$28		\$28		\$28		\$28	
	250	\$78	250	\$69	No Co	: verage	No	Coverage			
All Risks Actual  101Al  * Automobile Death Ber		\$917		\$938		\$782		\$866 Premum \$8			
Premium Summary This is not a bill.  Schoolde of Garges Maintain General Informat	Skircharge: \$0						dditional P			0.00	
Item Rated Driver	Day Safety Reco		Est Am Mill		6.0.00 Zp 94542	Vehicle thispe		Gernler	Marital M		
1 WANDIA HOKE 2 ELLEN HOKE	0 Pt 0 Pt	17	5,00 4,00	=30.991(3.50)	94542			ſ		See reverse fo explanation o	
3 KENNETH HOKE	0 Pt	48	5,00	iM C	94542			M			
4 KENNETTE HOKE	O Pt	9	1,00	) Mi	94542			F	S		
Discounts: Mature Driver: None.	3, 4.			Nev	lti Car: Item v Driver. No od Student:	one.	4				
Good Driver: Item(s) 1, 2, 1 Multi Policy: None.											

\$\$ 1500 6414 07-30-2015 00001 0100