



ADDITIONAL REMARKS SCHEDULE

AGENCY JORGE ENRIQUE MANCHENO		NAMED INSURED CW SPEECH & LANGUAGE PATHOLOGISTS INC DBA COMMUNICATION WORKS 950 RISA RD LAFAYETTE CA 94549-3418	
POLICY NUMBER SEE ACORD 25		EFFECTIVE DATE: SEE ACORD 25	
CARRIER SEE ACORD 25	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM

FORM NUMBER: ACORD 25 **FORM TITLE:** CERTIFICATE OF LIABILITY INSURANCE

MOUNT DIABLO UNIFIED SCHOOL DISTRICT, its subsidiaries, officials and employees are covered as Additional Insured with respect to liability arising out of activities performed by the named insured when required by written contract per the Business Liability Coverage Form SS0008, the Hired Auto and Non Owned Auto Endorsement SS0438 and the Umbrella Liability Provisions Form SX8002. Coverage is Primary and Non-Contributory per the Business Liability Coverage Form SS0008 and the Hired Auto and Non Owned Auto Endorsement SS0438 attached to this policy.

