

CERTIFICATE OF INSURANCE

DATE ISSUED:

BROKER/AGENT:

COMPANIES AFFORDING COVERAGE

COMPANY A

COMPANY B

NAMED INSURED:

COMPANY C

COMPANY D

COMPANY E

COVERAGE

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTHING HEREIN SHALL BE HELD TO WAIVE, ALTER OR EXTEND ANY OF THE LIMITS, CONDITIONS, AGREEMENT OR EXCLUSIONS OF THE POLICY TO WHICH THIS CERTIFICATE APPLIES.

CO. LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
	GENERAL LIABILITY				GENERAL AGGREGATE	\$
	COMPREHENSIVE FORM				PRODUCTS-COMP/OPS AGGREGATE	\$
	BROAD FORM EXTENSION INCLUDED				PERSONAL & ADVERTISING INJURY	\$
	COMMERCIAL FORM				EACH OCCURRENCE	\$
	CLAIMS MADE OCCURRENCE				FIRE DAMAGE (ANY ONE FIRE)	\$
	SEVERABILITY OF INTEREST CLAUSE				MEDICAL EXPENSE (ANY ONE PERSON)	\$
	CROSS LIABILITY CLAUSE					
	AUTOMOBILE LIABILITY				CSL	\$
	ANY AUTO (CODE 1)				BODILY INJURY (PER PERSON)	\$
	ALL OWNED AUTOS (CODE 2)					
	SCHEDULED AUTOS (CODE 7)				BODILY INJURY (PER ACCIDENT)	\$
	HIRED AUTOS (CODE 8)					
	NON-OWNED AUTOS (CODE 9)				PROPERTY DAMAGE	\$
	OTHER					
	EXCESS LIABILITY				EACH OCCURRENCE	AGGREGATE
	UMBRELLA FORM				\$	\$
	OTHER					
	CLAIMS MADE OCCURRENCE					

SPECIAL PROVISIONS:

1. THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, ITS OFFICERS, AGENTS, AND EMPLOYEES ARE INCLUDED AS INSURED BUT ONLY IN CONNECTION WITH AGREEMENT BETWEEN THE UNIVERSITY'S COLLEGE WORK-STUDY PROGRAM AND:
2. THIS INSURANCE SHALL BE PRIMARY INSURANCE AS RESPECTS THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, ITS OFFICERS, AGENTS, AND EMPLOYEES. ANY INSURANCE OR SELF-INSURANCE MAINTAINED BY THE REGENTS OF THE UNIVERSITY OF CALIFORNIA SHALL BE EXCESS OF AND NON-CONTRIBUTORY WITH THIS INSURANCE.
3. THE PROVISIONS UNDER PARAGRAPHS (1 & 2) OF THIS SECTION, "SPECIAL PROVISIONS", SHALL APPLY TO CLAIMS, COSTS, INJURIES OR DAMAGES BUT ONLY IN PROPORTION TO AND TO THE EXTENT SUCH CLAIMS, COSTS, INJURIES OR DAMAGES ARE CAUSED BY OR RESULT FROM THE NEGLIGENT ACTS OR OMISSIONS OF THE NAMED INSURED.
4. SHOULD ANY OF THE INSURANCE PROGRAMS DESCRIBED HEREIN BE MATERIALLY MODIFIED OR CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL MAIL THIRTY (30) DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED BELOW.

CERTIFICATE HOLDER:

THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, et al
CAMPUS FACILITY:

STUDENT FINANCIAL SERVICES OFFICE
500 PARNASSUS AVENUE, MU-201W
SAN FRANCISCO, CA 94143

THE UNDERSIGNED WARRANTS THAT HE/SHE HAS AUTHORITY TO BIND THE ABOVE LISTED COMPANY/COMPANIES TO THE SPECIAL PROVISIONS DESCRIBED HEREIN AND BY AFFIXING HIS/HER SIGNATURE HEREON DOES WARRANT THAT ENDORSEMENTS HAVE BEEN ISSUED TO CONFORM WITH THE ABOVE SPECIAL PROVISIONS.

AUTHORIZED REPRESENTATIVE:

Note: Minimum limits for each occurrence are listed on #7A of the Federal Work-Study Contract