ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 09/23/2014

PRODUCER Phone: 408-280-2100 Fax: 408-280-2110
ONEPOINT BUSINESS & INSURANCE SERVICES
950 S. BASCOM AVE., SUITE 2118
SAN JOSE CA 95128

Agency Lic#: 0B93863

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
LEADERS IN COMMUNITY ALTERNATIVES, INC
1035 MARKET ST, STE 550
SAN FRANCISCO CA 94103

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Lloyd's Synd 2987 (Brit Syndicates Ltd)	
INSURER B: United Financial Casualty Company	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC	CJ10017414	09/23/14	09/23/15	EACH OCCURRENCE	$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurence)	$ 100,000
						MED. EXP (Any one person)	$ 1,000
						PERSONAL & ADV INJURY	$ 1,000,000
						GENERAL AGGREGATE	$ 3,000,000
						PRODUCTS-COMP/OP AGG.	$ 3,000,000
							$
B		AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS X SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS	02396595-1	09/11/14	09/11/15	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
						BODILY INJURY (Per person)	$
						BODILY INJURY (Per accident)	$
						PROPERTY DAMAGE (Per accident)	$
		GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT	$
						OTHER THAN AUTO ONLY: EA ACC	$
						AGG	$
A		EXCESS / UMBRELLA LIABILITY OCCUR CLAIMS MADE DEDUCTIBLE RETENTION $	CJ10017514	09/23/14	09/23/15	EACH OCCURRENCE	$ 4,000,000
						AGGREGATE	$ 4,000,000
							$
							$
							$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS OTHER	
						E.L. EACH ACCIDENT	$
						E.L. DISEASE-EA EMPLOYEE	$
						E.L. DISEASE-POLICY LIMIT	$
A		OTHER: Professional Liability	CJ10017414	09/23/14	09/23/15	Per Occ. $1M/$3M Agg.	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS

Certificate of Insurance naming City and County of San Francisco, Its Officers, Agents, and Employees as an Additional Insured as required by written contract with respect to work performed by insured.
Project: All California Operations

CERTIFICATE HOLDER

SAN FRANCISCO SHERIFF'S DEPT.
CITY HALL
1 DR. CARLTON B. GOODLETT PLACE, ROOM 456
SAN FRANCISCO, CA 94102

Attention:

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, IT'S AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Jeff Senigaglia

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement # effective 09/23/14 forms a part of Policy # CJ10017414
Issued To: Leaders in Community Alternatives, Inc.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – AUTOMATIC STATUS WHEN REQUIRED IN AGREEMENT WITH YOU

This endorsement modifies insurance provided under the following:

CRIMINAL JUSTICE SYSTEM OPERATIONS LIABILITY POLICY

A. **SECTION II – WHO IS AN INSURED** is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

   1. Your acts or omissions; or

   2. The acts or omissions of those acting on your behalf;

   A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

   This insurance does not apply to:

   1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

      a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or

      b. Supervisory, inspection, architectural or engineering activities.

   2. "Bodily injury" or "property damage" occurring after:

      a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or

      b. That portion of "your work" out of which the injury or "damages" arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

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This endorsement # effective 09/23/14 forms a part of Policy # CJ10017414
Issued To: Leaders in Community Alternatives, Inc.

LIMITATION OF COVERAGE TO DESIGNATED PREMISES OR PROJECT

This endorsement modifies insurance provided under the following:

CRIMINAL JUSTICE SYSTEM OPERATIONS LIABILITY POLICY

This applies to specific following Coverages if indicated (X) below:

Coverage		
Coverage A	Bodily Injury, Property Damage	☒
Coverage B	Personal and Advertising Injury	☒
Coverage C	Medical Payments	☒
Coverage D	Professional Liability	☒
Coverage E	Employment Related Practices Liability	☐
Coverage F	Employee Benefits Liability	☐
Coverage G	Healthcare Providers Liability	☐

SCHEDULE OF PREMISES AND/OR PROJECT(S)
Per Form CJSL (01/09)
(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

This insurance applies only to "claims" for "damages" arising out of or resulting from:

1. The ownership, maintenance or use of the premises shown in the Schedule; and/or
2. The project shown in the Schedule.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US AUTOMATIC STATUS WHEN REQUIRED IN AGREEMENT WITH YOU

This Endorsement modifies Insurance provided under the following:

CRIMINAL JUSTICE SYSTEM OPERATIONS LIABILITY POLICY

A. The **Transfer Of Rights Of Recovery Against Others To Us** Condition (Section **IV – Conditions**) is amended by the addition of the following:

We waive any right of recovery we may have against any person or organization for whom you are performing operations when you and such person or organization have agreed to such waiver of recovery in writing in a contract or agreement:

(1) because of "bodily injury", "property damage" or "personal and advertising injury" solely arising out of your "ongoing operations" or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard"; or

(2) because of "wrongful act(s)" solely arising out of your "professional services" done under a contract with that person or organization.

This waiver applies only if such is required by contract or agreement and ends upon the termination of such contract.

B. For purposes of this Endorsement, **SECTION V – DEFINITIONS** is amended by adding the following defined terms:

"Inmates" includes a prisoner, detainee or any person in the full-time or part-time care, custody or control of any insured.

"Ongoing operations" means the business described in Item 1. BUSINESS DESCRIPTION of the Common Policy Declarations.

"Professional services" means those services that you provide in the conduct of your business to provide:

a. Security and supervision of a facility and "inmates";

b. Services such as meals, educational service and supervised activities for "inmates";

or as required under contract for the facility(ies).

"Wrongful act(s)" means any actual or alleged:

a. Breach of duty,

b. Neglect, error, misstatement, misleading statement, omission or act, or

c. Violation of civil rights

committed, individually or collectively, by an insured within the course and scope of their duties for you in the rendering or failure to render the "professional services" shown in the Declarations.

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Issued To: Leaders in Community Alternatives, Inc.

SEXUAL MISCONDUCT LIABILITY COVERAGE

This endorsement modifies insurance provided under the following:

CRIMINAL JUSTICE SYSTEM OPERATIONS LIABILITY POLICY - COVERAGE D - PROFESSIONAL LIABILITY COVERAGE

COVERAGE D – PROFESSIONAL LIABILITY COVERAGE endorsement is amended as follows:

A. **SECTION I – COVERAGES, 2. Exclusions,** the exclusion **Sexual Misconduct** is deleted.

B. In the **DEFINITIONS** Section, the definition **"Wrongful Act(s)"** is amended and the following added:

"Wrongful act(s)" shall include "sexual misconduct".

Limits of Insurance applicable to the coverage provided by this endorsement shall be the sublimit shown in the Declarations for Sexual Misconduct under **COVERAGE D – PROFESSIONAL LIABILITY COVERAGE**, and subject to all terms and conditions of the policy.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

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ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/23/2014

PRODUCER Phone: (408) 280-2100 Fax: (408) 280-2110
PROFESSIONAL INSURANCE ASSOC.
P O BOX 1266
SAN CARLOS CA 94070

Agency Lic#: 046757

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INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: State Compensation Insurance Fund	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

INSURED
LEADERS IN COMMUNITY ALTERNATIVES, INC
1035 MARKET ST, STE 550
SAN FRANCISCO CA 94103

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY				EACH OCCURRENCE	$
		COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurence)	$
		CLAIMS MADE / OCCUR				MED. EXP (Any one person)	$
						PERSONAL & ADV INJURY	$
						GENERAL AGGREGATE	$
		GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS-COMP/OP AGG.	$
		POLICY / PRO-JECT / LOC					$
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	$
		ANY AUTO				BODILY INJURY (Per person)	$
		ALL OWNED AUTOS					
		SCHEDULED AUTOS				BODILY INJURY (Per accident)	$
		HIRED AUTOS					
		NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident)	$
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
		ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	$
						AGG	$
		EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE	$
		OCCUR / CLAIMS MADE				AGGREGATE	$
							$
		DEDUCTIBLE					$
		RETENTION $					$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	9025319-14	09/23/14	09/23/15	X WC STATU-TORY LIMITS / OTHER	
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	$ 1,000,000
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE-EA EMPLOYEE	$ 1,000,000
						E.L. DISEASE-POLICY LIMIT	$ 1,000,000
		OTHER:					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS

Certificate of Insurance for City and County of San Francisco, its Officers, Agents, and Employees as required by written contract with respect to work performed by insured.
Project: All California Operations

CERTIFICATE HOLDER

SAN FRANCISCO SHERIFF'S DEPT.
CITY HALL
1 DR. CARLTON B. GOODLETT PLACE, ROOM 456
SAN FRANCISCO, CA 94102

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AUTHORIZED REPRESENTATIVE

Jeff Senigaglia

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