

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

## **POLICY CHANGES**

Policy Change  
Number

|                         |                             |                           |
|-------------------------|-----------------------------|---------------------------|
| POLICY NUMBER           | POLICY CHANGES<br>EFFECTIVE | COMPANY                   |
| NAMED INSURED           |                             | AUTHORIZED REPRESENTATIVE |
| COVERAGE PARTS AFFECTED |                             |                           |
| CHANGES                 |                             |                           |

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Authorized Representative Signature