

ABUSE OR MOLESTATION EXCLUSION

Named Insured			Endorsement Number
Policy Symbol	Policy Number	Policy Period to	Effective Date of Endorsement
Issued By (Name of Insurance Company)			

Insert the policy number. The remainder of the information is to be completed only when this endorsement is issued subsequent to the preparation of the policy.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

COMMERCIAL UMBRELLA LIABILITY POLICY

This insurance does not apply to any "bodily injury", "property damage" or "personal and advertising injury":

1. Arising out of the actual or threatened abuse or molestation of any person, including but not limited to physical abuse, corporal punishment, sexual abuse, sexual molestation, or sexual misconduct by any "insured", any employee of an "insured", or anyone acting on behalf of an "insured"; or
2. For which any "insured" may be held liable in causing or in failing to prevent such actual or threatened abuse or molestation.

All other terms and conditions of the policy remain unchanged.

Authorized Agent