

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/010

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 11-20-18
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 1,455.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- Insured's Name
- Insured's Mailing Address
- Policy Number
- Company
- Effective/Expiration Date
- Insured's Legal Status/Business of Insured
- Payment Plan
- Premium Determination
- Additional Interested Parties
- Coverage Forms and Endorsements
- Limits/Exposures
- Deductibles
- Covered Property/Location Description
- Classification/Class Codes
- Rates
- Underlying Exposure/Insurance

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0204 - FL 2019 CHEVY CRUZ VIN# 1G1BC5SM6K7100328 LOCATED
AT USF CAMPUS IN TAMPA 33620

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$ 1,455.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional

Return

Countersigned By:



AUTHORIZED AGENT

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-20-18

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/010

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-20-18
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/010

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-20-18
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/010
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 204

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2019

Use:

Make: CHEVY

Class Code: 739800

Model: CRUZ

State: FL

V.I.N.: 1G1BC5SM6K7100328

Territory: 107

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

1233.00 A/P

Personal Injury Protection (PIP)

See Endorsement

57.00 A/P

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

\$ 5,000

13.00 A/P

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

ACV

\$ 500

33.00 A/P

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

ACV

\$ 500

119 A/P

Physical Damage – Towing and Labor

INCL

Other Auto Coverages

Total:

1455.00 A/P

Vehicle #

Insured's #:

Vehicle Is:

Insured Entity:

Year:

Use:

Make:

Class Code:

Model:

State:

V.I.N.:

Territory:

Valuation:

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

Personal Injury Protection (PIP)

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

Physical Damage – Towing and Labor

Other Auto Coverages

Total:

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/011

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 01-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 1,218.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- | | |
|--|---|
| <input type="checkbox"/> Insured's Name | <input type="checkbox"/> Insured's Mailing Address |
| <input type="checkbox"/> Policy Number | <input type="checkbox"/> Company |
| <input type="checkbox"/> Effective/Expiration Date | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan | <input type="checkbox"/> Premium Determination |
| <input type="checkbox"/> Additional Interested Parties | <input type="checkbox"/> Coverage Forms and Endorsements |
| <input type="checkbox"/> Limits/Exposures | <input type="checkbox"/> Deductibles |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes |
| <input type="checkbox"/> Rates | <input type="checkbox"/> Underlying Exposure/Insurance |

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0205 - FL 2018 TOYOTA VIN# JTMRJREV6JD242430 LOCATED AT
UNIVERSITY OF SOUTH FLORIDA MAIN CAMPUS 33620

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$	1,218.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional

Return

Countersigned By:



AUTHORIZED AGENT

Policy Number
GPPA-AU-4050065-01/011

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 01-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/011

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 01-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/011

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 01-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/011
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 205

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2018

Use:

Make: TOYOTA

Class Code: 739800

Model: RAV 4

State: FL

V.I.N.: JTMRJREV6JD242430

Territory: 107

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

1030.00 A/P

Personal Injury Protection (PIP)

See Endorsement

47.00 A/P

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

\$ 5,000

11.00 A/P

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

ACV

\$ 500

31.00 A/P

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

ACV

\$ 500

99 A/P

Physical Damage – Towing and Labor

INCL

Other Auto Coverages

Total:

1218.00 A/P

Vehicle #

Insured's #:

Vehicle Is:

Insured Entity:

Year:

Use:

Make:

Class Code:

Model:

State:

V.I.N.:

Territory:

Valuation:

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

Personal Injury Protection (PIP)

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

Physical Damage – Towing and Labor

Other Auto Coverages

Total:

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/013

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 02-18-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 62.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- Insured's Name
- Insured's Mailing Address
- Policy Number
- Company
- Effective/Expiration Date
- Insured's Legal Status/Business of Insured
- Payment Plan
- Premium Determination
- Additional Interested Parties
- Coverage Forms and Endorsements
- Limits/Exposures
- Deductibles
- Covered Property/Location Description
- Classification/Class Codes
- Rates
- Underlying Exposure/Insurance

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN DELETED:
0133 - FL 2016 GMC YUKON DENALI VIN# 1GKS1CKJGR337755
LOACATED AT UNIVERSITY OF NORTH FLORIDA

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0206 - FL 2019 GMC VIN# 1GKS1CKJ0KR141473 LOCATED AT
UNIVERSITY OF NORTH FLORIDA

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$ 62.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional Return

Countersigned By:



AUTHORIZED AGENT

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/013

COMMON POLICY CHANGE ENDORSEMENT

Policy Period: From 10-20-2018
To 10-20-2019

Named Insured STATE OF FLORIDA

Effective Date: 02-18-19

Agency Name Glatfelter Underwriting Services, Inc.

12:01 A.M., Standard Time

POLICY CHANGES ENDORSEMENT DESCRIPTION (CONT'D)

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

REMOVAL PERMIT

If this policy includes the Commercial Property Coverage Part, the following applies with respect to the Coverage Part:

If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change; after that, this insurance does not apply at the previous location.

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 02-18-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/013

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 02-18-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/013

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 02-18-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/013
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 133 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2016
Make: GMC YUKON DENALI
Model:
V.I.N.: 1GKS1CKJGR337755
Valuation: Actual Cash Value

Use:
Class Code: 739800
State: FL
Territory: 136

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-573.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-22.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-9.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-35.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-78 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-717.00 R/P

Vehicle # 206 Insured's #:
Vehicle Is: ADDED: Insured Entity:

Year: 2019
Make: GMC
Model: DENALI
V.I.N.: 1GKS1CKJ0KR141473
Valuation: Actual Cash Value

Use:
Class Code: 739800
State: FL
Territory: 136

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		573.00 A/P
Personal Injury Protection (PIP)	See Endorsement		22.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		9.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	50.00 A/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	125 A/P
Physical Damage – Towing and Labor			INCL
Other Auto Coverages			
Total:			779.00 A/P

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/014

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019

COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 03-12-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 651.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- | | |
|--|---|
| <input type="checkbox"/> Insured's Name | <input type="checkbox"/> Insured's Mailing Address |
| <input type="checkbox"/> Policy Number | <input type="checkbox"/> Company |
| <input type="checkbox"/> Effective/Expiration Date | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan | <input type="checkbox"/> Premium Determination |
| <input type="checkbox"/> Additional Interested Parties | <input type="checkbox"/> Coverage Forms and Endorsements |
| <input type="checkbox"/> Limits/Exposures | <input type="checkbox"/> Deductibles |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes |
| <input type="checkbox"/> Rates | <input type="checkbox"/> Underlying Exposure/Insurance |

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0207 - FL 2019 GMC VIN# 3GKALMEX7KL213983 LOCATED AT UNF
ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$ 651.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional Return

Countersigned By:



AUTHORIZED AGENT

Policy Number
GPPA-AU-4050065-01/014

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 03-12-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/014

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 03-12-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/014

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 03-12-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/014
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 207

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2019

Use:

Make: GMC

Class Code: 739800

Model: TERRIAN SLE

State: FL

V.I.N.: 3GKALMEX7KL213983

Territory: 136

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)	\$ 1,000,000		522.00 A/P
Personal Injury Protection (PIP)	See Endorsement		20.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		9.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	26.00 A/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	74 A/P
Physical Damage – Towing and Labor			INCL
Other Auto Coverages			
Total:			651.00 A/P

Vehicle #

Insured's #:

Vehicle Is:

Insured Entity:

Year:

Use:

Make:

Class Code:

Model:

State:

V.I.N.:

Territory:

Valuation:

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)			
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments			
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive			
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision			
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/015

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 03-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ -341.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- | | |
|--|---|
| <input type="checkbox"/> Insured's Name | <input type="checkbox"/> Insured's Mailing Address |
| <input type="checkbox"/> Policy Number | <input type="checkbox"/> Company |
| <input type="checkbox"/> Effective/Expiration Date | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan | <input type="checkbox"/> Premium Determination |
| <input type="checkbox"/> Additional Interested Parties | <input type="checkbox"/> Coverage Forms and Endorsements |
| <input type="checkbox"/> Limits/Exposures | <input type="checkbox"/> Deductibles |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes |
| <input type="checkbox"/> Rates | <input type="checkbox"/> Underlying Exposure/Insurance |

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN DELETED:
0086 - FL 2005 GMC SAVANA VIN# 1GJHG39U451158163
LOCATED AT NCF

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional	Return \$	-341.00
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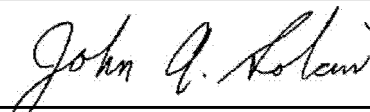
Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional

Return

Countersigned By:



AUTHORIZED AGENT

Policy Number
GPPA-AU-4050065-01/015

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 03-14-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/015

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 03-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/015

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 03-14-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/015
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 86 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2005
Make: GMC SAVANA
Model: SERVICE
V.I.N.: 1GJHG39U451158163
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 144

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-297.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-8.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-3.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-11.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-22 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-341.00 R/P

Vehicle # Insured's #:
Vehicle Is: Insured Entity:

Year:
Make:
Model:
V.I.N.:
Valuation:

Use:
Class Code:
State:
Territory:

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)			
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments			
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive			
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision			
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/016

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 456.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- Insured's Name
- Insured's Mailing Address
- Policy Number
- Company
- Effective/Expiration Date
- Insured's Legal Status/Business of Insured
- Payment Plan
- Premium Determination
- Additional Interested Parties
- Coverage Forms and Endorsements
- Limits/Exposures
- Deductibles
- Covered Property/Location Description
- Classification/Class Codes
- Rates
- Underlying Exposure/Insurance

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0208 - FL 2018 PETERSON TL3 VIN# 1FVACXFC1JHJZ1862
LOCATED AT DOH IN HOLMES COUNTY

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$	456.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional

Return

Countersigned By:



AUTHORIZED AGENT

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/016

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/016

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/016
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 208

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2018

Use: Service

Make: PETERSON TL3

Class Code: 314990

Model: FREIGHTLINER

State: FL

V.I.N.: 1FVACXFC1JHJZ1862

Territory: 172

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

257.00 A/P

Personal Injury Protection (PIP)

See Endorsement

7.00 A/P

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

\$ 5,000

3.00 A/P

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

ACV

\$ 500

36.00 A/P

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

ACV

\$ 500

153 A/P

Physical Damage – Towing and Labor

INCL

Other Auto Coverages

Total:

456.00 A/P

Vehicle #

Insured's #:

Vehicle Is:

Insured Entity:

Year:

Use:

Make:

Class Code:

Model:

State:

V.I.N.:

Territory:

Valuation:

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

Personal Injury Protection (PIP)

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

Physical Damage – Towing and Labor

Other Auto Coverages

Total:

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/020

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 456.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- | | |
|--|---|
| <input type="checkbox"/> Insured's Name | <input type="checkbox"/> Insured's Mailing Address |
| <input type="checkbox"/> Policy Number | <input type="checkbox"/> Company |
| <input type="checkbox"/> Effective/Expiration Date | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan | <input type="checkbox"/> Premium Determination |
| <input type="checkbox"/> Additional Interested Parties | <input type="checkbox"/> Coverage Forms and Endorsements |
| <input type="checkbox"/> Limits/Exposures | <input type="checkbox"/> Deductibles |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes |
| <input type="checkbox"/> Rates | <input type="checkbox"/> Underlying Exposure/Insurance |

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING ADDITIONAL INTEREST (ADDL NAMED INSURED) HAS BEEN ADDED TO THE POLICY:
DEPARTMENT OF TRANSPORTATION

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0211 - FL 2018 PETERSON VIN# 1FVACXFC1JHJZ1862 LOCATED AT
DOT YARD 1723 SUNRISE CIRCLE, PONCE DE LEON, FL 32455

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

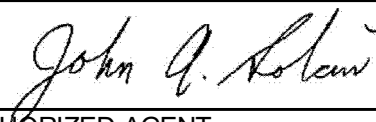
<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$ 456.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional Return

Countersigned By:



AUTHORIZED AGENT

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/020

Policy Period: From 10-20-2018
To 10-20-2019

COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

POLICY CHANGES ENDORSEMENT DESCRIPTION (CONT'D)

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

REMOVAL PERMIT

If this policy includes the Commercial Property Coverage Part, the following applies with respect to the Coverage Part:

If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change; after that, this insurance does not apply at the previous location.

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/020

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/020

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

DEPARTMENT OF TRANSPORTATION

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/020
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 211

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2018

Use: Service

Make: PETERSON

Class Code: 314990

Model: TL3

State: FL

V.I.N.: 1FVACXFC1JHJZ1862

Territory: 172

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)	\$ 1,000,000		257.00 A/P
Personal Injury Protection (PIP)	See Endorsement		7.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		3.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	36.00 A/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	153 A/P
Physical Damage – Towing and Labor			INCL
Other Auto Coverages			
Total:			456.00 A/P

Vehicle #

Insured's #:

Vehicle Is:

Insured Entity:

Year:

Use:

Make:

Class Code:

Model:

State:

V.I.N.:

Territory:

Valuation:

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)			
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments			
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive			
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision			
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/020

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 456.00
- General Liability
- Public Officials and Management Liability
-
-

The following item(s):

- Insured's Name
- Insured's Mailing Address
- Policy Number
- Company
- Effective/Expiration Date
- Insured's Legal Status/Business of Insured
- Payment Plan
- Premium Determination
- Additional Interested Parties
- Coverage Forms and Endorsements
- Limits/Exposures
- Deductibles
- Covered Property/Location Description
- Classification/Class Codes
- Rates
- Underlying Exposure/Insurance

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING ADDITIONAL INTEREST (ADDL NAMED INSURED) HAS BEEN ADDED TO THE POLICY:
DEPARTMENT OF TRANSPORTATION

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0211 - FL 2018 PETERSON VIN# 1FVACXFC1JHJZ1862 LOCATED AT
DOT YARD 1723 SUNRISE CIRCLE, PONCE DE LEON, FL 32455

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

No Changes To be Adjusted at Audit Additional \$ 456.00 Return

Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional Return

Countersigned By:



AUTHORIZED AGENT

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/020

Policy Period: From 10-20-2018
To 10-20-2019

COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

POLICY CHANGES ENDORSEMENT DESCRIPTION (CONT'D)

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

REMOVAL PERMIT

If this policy includes the Commercial Property Coverage Part, the following applies with respect to the Coverage Part:

If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change; after that, this insurance does not apply at the previous location.

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/020

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/020

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-01-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

DEPARTMENT OF TRANSPORTATION

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/020
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 211

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2018

Use: Service

Make: PETERSON

Class Code: 314990

Model: TL3

State: FL

V.I.N.: 1FVACXFC1JHJZ1862

Territory: 172

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

257.00 A/P

Personal Injury Protection (PIP)

See Endorsement

7.00 A/P

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

\$ 5,000

3.00 A/P

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

ACV

\$ 500

36.00 A/P

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

ACV

\$ 500

153 A/P

Physical Damage – Towing and Labor

INCL

Other Auto Coverages

Total:

456.00 A/P

Vehicle #

Insured's #:

Vehicle Is:

Insured Entity:

Year:

Use:

Make:

Class Code:

Model:

State:

V.I.N.:

Territory:

Valuation:

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

Personal Injury Protection (PIP)

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

Physical Damage – Towing and Labor

Other Auto Coverages

Total:

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/017

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-03-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ 884.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- Insured's Name
- Insured's Mailing Address
- Policy Number
- Company
- Effective/Expiration Date
- Insured's Legal Status/Business of Insured
- Payment Plan
- Premium Determination
- Additional Interested Parties
- Coverage Forms and Endorsements
- Limits/Exposures
- Deductibles
- Covered Property/Location Description
- Classification/Class Codes
- Rates
- Underlying Exposure/Insurance

is (are) changed to read **{See Additional Page(s)}**

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0209 - FL 2019 FORD TRANSIT VIN# 1FTBW1DM1KA70799
LOCATED AT UNIVERSITY OF SOUTH FLORIDA

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

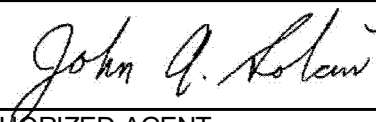
<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional \$	884.00	Return
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Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional	Return
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Countersigned By:



AUTHORIZED AGENT

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-03-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/017

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-03-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/017

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-03-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/017
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 209 Insured's #:
Vehicle Is: ADDED: Insured Entity:

Year: 2019
Make: FORD
Model: TRANSIT
V.I.N.: 1FTBW1DM1KA70799
Valuation: Actual Cash Value

Use:
Class Code: 739800
State: FL
Territory: 107

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		739.00 A/P
Personal Injury Protection (PIP)	See Endorsement		34.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		8.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	25.00 A/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	78 A/P
Physical Damage – Towing and Labor			INCL
Other Auto Coverages			
Total:			884.00 A/P

Vehicle # Insured's #:
Vehicle Is: Insured Entity:

Year:
Make:
Model:
V.I.N.:
Valuation:

Use:
Class Code:
State:
Territory:

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)			
Personal Injury Protection (PIP)			
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments			
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive			
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision			
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/019

THIS ENDORSEMENT CHANGES THE POLICY. Policy Period: From 10-20-2018
PLEASE READ IT CAREFULLY. To 10-20-2019
COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-10-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

This endorsement will not be used to decrease coverages, increase rates or deductibles or alter any terms or conditions of coverage unless at the sole request of the insured.

COVERAGE PART INFORMATION – Coverage parts affected by this change as indicated by below.

- Property
- Crime
- Inland Marine
- Auto \$ -179.00
- General Liability
- Public Officials and Management Liability
-

The following item(s):

- | | |
|--|---|
| <input type="checkbox"/> Insured's Name | <input type="checkbox"/> Insured's Mailing Address |
| <input type="checkbox"/> Policy Number | <input type="checkbox"/> Company |
| <input type="checkbox"/> Effective/Expiration Date | <input type="checkbox"/> Insured's Legal Status/Business of Insured |
| <input type="checkbox"/> Payment Plan | <input type="checkbox"/> Premium Determination |
| <input type="checkbox"/> Additional Interested Parties | <input type="checkbox"/> Coverage Forms and Endorsements |
| <input type="checkbox"/> Limits/Exposures | <input type="checkbox"/> Deductibles |
| <input type="checkbox"/> Covered Property/Location Description | <input type="checkbox"/> Classification/Class Codes |
| <input type="checkbox"/> Rates | <input type="checkbox"/> Underlying Exposure/Insurance |

is (are) changed to read **{See Additional Page(s)}**

SEE NEXT PAGE

The above amendments result in a change in the premium as follows:

This premium does not include taxes and surcharges.

<input type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional	Return \$	-179.00
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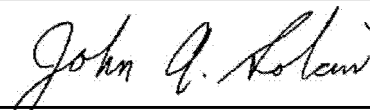
Tax and Surcharge Changes

For New York, Tax and Surcharges do not apply.
For New York, the NY Motor Vehicle Law Enforcement Fee and/or NY Fire Fee may be included.

Additional

Return

Countersigned By:



AUTHORIZED AGENT

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/019

Policy Period: From 10-20-2018
To 10-20-2019

COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 04-10-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

POLICY CHANGES ENDORSEMENT DESCRIPTION (CONT'D)

LIABILITY SYMBOLS HAVE BEEN CHANGED FROM 1 TO 7.

COMPREHENSIVE SYMBOLS HAVE BEEN CHANGED FROM 7,8 TO 7.

COLLISION SYMBOLS HAVE BEEN CHANGED FROM 7,8 TO 7.

EXCESS HIRED AUTO LIABILITY COVERAGE FOR THE STATE OF FLORIDA HAS BEEN DELETED.

NONOWNED AUTO COVERAGE HAS BEEN DELETED FOR THE STATE OF FLORIDA.

EMPLOYEES AS ADDITIONAL INSUREDS COVERAGE HAS BEEN DELETED.

OTHER THAN COLLISION HIRED CAR PHYSICAL DAMAGE COVERAGE HAS BEEN DELETED.

COLLISION HIRED CAR PHYSICAL DAMAGE COVERAGE HAS BEEN DELETED.

THE HIRED AUTO PHYSICAL DAMAGE IS DELETED FROM THE POLICY.

THE FOLLOWING VEHICLE HAS BEEN DELETED:

0062 - FL 2007 FORD ECONOLINE E250 VIN#
1FTNE24W27DA11649

THE FOLLOWING VEHICLE HAS BEEN ADDED:

0210 - FL 2019 DODGE VIN# 2C4RDGB2KR654747 LOCATED AT THE
PUBLIC DEFENDER'S OFFICE IN THE 20TH CIRCUIT

COVERED VEHICLE SYMBOL OVERRIDE FOR SYMBOL 10 - ANY AUTO EXCEPT AUTOS OWNED, NON-OWNED OR HIRED BY THE STATE OF FLORIDA'S OWNED ENTITIES, DEPARTMENTS, OPERATIONS AND /OR SUBSIDIARIES, NOT SHOWN ON THE SCHEDULE OF NAMED INSUREDS. HAS BEEN DELETED.

THE FOLLOWING FORM(S) HAS BEEN DELETED:

CA 99 54 07-97 COVERED AUTO DESIGNATION SYMBOL
GCO400 01-09 AUTO - COMMON POLICY CHANGE ENDORSEMENT

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

REMOVAL PERMIT

If this policy includes the Commercial Property Coverage Part, the following applies with respect to the Coverage Part:

If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change; after that, this insurance does not apply at the previous location.

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-10-19

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

Loss Payee
ENTERPRISE FM TRUST
PO BOX 16805
SAINT LOUIS, MO 63105
DESCRIPTION APPLIES TO #6145, #9863, #7526

Loss Payee
BB&T
200 WEST FORSYTH ST #200
JACKSONSVILLE, FL 32202
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
GT LEASING
PO BOX 10196
JACKSONSVILLE, FL 32247
DESCRIPTION APPLIES TO VEHICLES #5738, #8197, #1791

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1034,#9208,#8857,#7163

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8690,#0920,#0800, #7136

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #9226,#0499,#9100,#9855

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #8722,#8849,#7286,#8902

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7198,#0646,#8753, #7459

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
ENTERPRISE FM TRUST

Policy Number
GPPA-AU-4050065-01/019

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-10-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #7272, #0450, #9229, #8669

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #2929, #4105, #5472, #4959

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #0136, #2911, #3552

Addl Insured Lessor
ENTERPRISE FM TRUST
PO BOX 16805
ST LOUIS, MO 63105
DESCRIPTION APPLIES TO 2018 DODGE GRAND CARAVAN #0343, #0342, #1908

Policy Number
GPPA-AU-4050065-01/019

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 04-10-19
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT OF FINANCIAL SERVICES

DEPARTMENT OF HEALTH

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY

FLORIDA SCHOOL FOR THE DEAF AND BLIND

FLORIDA STATE UNIVERSITY

FLORIDA FISH & WILDLIFE COMMISSION

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

JUSTICE ADMINISTRATION
COMMISSION

NEW COLLEGE OF FLORIDA

UNIVERSITY OF FLORIDA

UNIVERSITY OF NORTH FLORIDA

UNIVERSITY OF SOUTH FLORIDA

UNIVERSITY OF WEST FLORIDA

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/019
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 62 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2007
Make: FORD ECONOLINE E250
Model: SERVICE
V.I.N.: 1FTNE24W27DA11649
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 142

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-294.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-7.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-3.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-12.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-16 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-332.00 R/P

Vehicle # 210 Insured's #:
Vehicle Is: ADDED: Insured Entity:

Year: 2019
Make: DODGE
Model: CARAVAN SE
V.I.N.: 2C4RDGB2KR654747
Valuation: Actual Cash Value

Use:
Class Code: 739800
State: FL
Territory: 142

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		451.00 A/P
Personal Injury Protection (PIP)	See Endorsement		25.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		7.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	16.00 A/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	60 A/P
Physical Damage – Towing and Labor			INCL
Other Auto Coverages			
Total:			559.00 A/P

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/019
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF MISCELLANEOUS AUTO CHANGES

Schedule of Hired, Borrowed, and Commandeered Coverage (if applicable)

Liability Coverage
Rating Basis, Cost of Hire

Coverage is:	State	Estimated Cost of Hire For Each State	Rate Per Each \$100 Cost of Hire	Factor (If Liability Coverage is Primary)	Premium
DELETED	FL	IF ANY	\$ 2.000		\$ -32.00 R/P
TOTAL PREMIUM:					\$ -32.00 R/P

Liability Coverage
Rating Basis, Number of Days –
(For Mobile or Farm Equipment) – Rental Period Basis

Coverage is:	State	Estimated Number of Days Equipment Will Be Rented	Base Premium	Factor	Premium
TOTAL PREMIUM:					

State: FL

Physical Damage

Coverage is:	Coverage	Valuation and Deductible	Estimated Cost of Hire	Premium
DELETED	Comprehensive	Actual cash value or the cost of repair, whichever is less, minus a deductible for each covered auto		-13.00 R/P
DELETED	Collision	Actual cash value or the cost of repair, whichever is less, minus a deductible for each covered auto		-13.00 R/P

Such insurance as is afforded by hired auto physical damage coverage also applies to autos you Commandeer.

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/019
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF MISCELLANEOUS AUTO CHANGES (continued)

Schedule of Non-Ownership Liability Coverage

Coverage is:	Named Insured's Business	Rating Basis	Number	Premium
DELETED	MUNICIPALITY	Number of volunteers/ employees		\$ -348.00 R/P
	Extended coverage			

Miscellaneous Changes

Coverage is:	Description	Premium