

American Alternative Insurance Corporation

Policy Number
GPPA-AU-4050065-01/012

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: 10-20-18
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 \$ -1,214.00
- 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:
0037 - FL 2012 HONDA CIVIC VIN# 19XFB5F53CE000140
LOCATED AT FSU

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 \$ -1,214.00
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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

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/012

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/012

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/012
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 37 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2012
Make: HONDA CIVIC
Model:
V.I.N.: 19XFB5F53CE000140
Valuation: Actual Cash Value

Use:
Class Code: 739800
State: FL
Territory: 123

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-1073.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-24.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-14.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-23.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-80 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-1214.00 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-4050065-01/007

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: 10-20-18
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 \$ -2,279.00
- 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:
0055 - FL 2006 CHEVROLET SILVERADO 1500 VIN#
2GCEC13T961141705

THE FOLLOWING VEHICLE HAS BEEN DELETED:
0064 - FL 2008 CHEVROLET IMPALA VIN# 2G1WB58K789198822

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 \$ -2,279.00
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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

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18

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-4050065-01/007

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/007

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/007
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 55 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2006
Make: CHEVROLET SILVERADO 1500
Model: SERVICE
V.I.N.: 2GCEC13T961141705
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 154

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-815.00 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		-5.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-33.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-42 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-917.00 R/P

Vehicle # 64 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2008
Make: CHEVROLET IMPALA
Model:
V.I.N.: 2G1WB58K789198822
Valuation: Actual Cash Value

Use:
Class Code: 739800
State: FL
Territory: 106

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-1224.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-64.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-14.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-18.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-42 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-1362.00 R/P

American Alternative Insurance Corporation

**Policy Number
GPPA-AU-4050065-01/009**

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: 10-20-18
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
- 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 VEHICLE MAKE FOR VEHICLE # 123 HAS BEEN CHANGED FROM A(N) FORD FUSION 2 (HYBRID) TO A(N) FORD FUSION 3 (HYBRID) .

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 checked="" type="checkbox"/> No Changes	<input type="checkbox"/> To be Adjusted at Audit	Additional	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: 10-20-18
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

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PO BOX 16805
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DESCRIPTION APPLIES TO 2018 NISSAN ALTIMA #1091,#1062,#7291,#0867

Addl Insured Lessor
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Policy Number
GPPA-AU-4050065-01/009

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Agency Name Glatfelter Underwriting Services, Inc.

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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
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SCHEDULE OF NAMED INSURED(S)

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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
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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-4050065-01/009
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 123 Insured's #:
Vehicle Is: CHANGED: Insured Entity:

Year: 2017 Use:
Make: FORD FUSION 3 (HYBRID) Class Code: 739800
Model: State: FL
V.I.N.: 3FA6P0UU1HR236175 Territory: 123
Valuation: Actual Cash Value

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

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-4050065-01/006

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: 10-20-18
12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

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

- Property
- Crime
- Inland Marine
- Auto \$ -1,062.00
- 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:
0131 - FL 2018 GMC VIN# GKALMEV1JL208582

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 \$ -1,062.00
-------------------------------------	--	------------	---------------------

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: 10-20-18
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-4050065-01/006

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/006

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/006
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 131 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2018
Make: GMC
Model: TERRAIN
V.I.N.: GKALMEV1JL208582
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		-858.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-33.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-14.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-42.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-115 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-1062.00 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-4050065-01/001

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: 10-20-18
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 \$ 2,207.00
- 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 \$ 2,207.00	Return
-------------------------------------	--	------------------------	--------

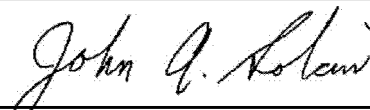
Tax and Surcharge Changes

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-4050065-01/001

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

COMMON POLICY CHANGE ENDORSEMENT

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18

12:01 A.M., Standard Time

Agency Name Glatfelter Underwriting Services, Inc.

POLICY CHANGES ENDORSEMENT DESCRIPTION (CONT'D)

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0197 - FL 2017 FORD VIN# 1FT7W2B69HEE58256 LOCATED AT USF

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0198 - FL 2011 FORD VIN# 1FT7W2B68BEB76147 LOCATED AT USF

THE FOLLOWING VEHICLE HAS BEEN ADDED:
0199 - FL 2018 EXPLORER VIN# 1FM5K7D89JGC76030 LOCATED AT
UWF

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.

Policy Number
GPPA-AU-4050065-01/001

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/001

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/001

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/001
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 197 Insured's #:
Vehicle Is: ADDED: Insured Entity:

Year: 2017
Make: FORD
Model: F250
V.I.N.: 1FT7W2B69HEE58256
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 132

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		435.00 A/P
Personal Injury Protection (PIP)	See Endorsement		10.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		5.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage -- Comprehensive	ACV	\$ 500	47.00 A/P
Physical Damage -- Specified Causes of Loss			
Physical Damage -- Collision	ACV	\$ 500	88.00 A/P
Physical Damage -- Towing and Labor			INCL
Other Auto Coverages			
Total:			585.00 A/P

Vehicle # 198 Insured's #:
Vehicle Is: ADDED: Insured Entity:

Year: 2011
Make: FORD
Model: F250 FWC
V.I.N.: 1FT7W2B68BEB76147
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 132

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		435.00 A/P
Personal Injury Protection (PIP)	See Endorsement		10.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		5.00 A/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage -- Comprehensive	ACV	\$ 500	35.00 A/P
Physical Damage -- Specified Causes of Loss			
Physical Damage -- Collision	ACV	\$ 500	53.00 A/P
Physical Damage -- Towing and Labor			INCL
Other Auto Coverages			
Total:			538.00 A/P

Named Insured:
STATE OF FLORIDA

Policy Number: GPPA-AU-4050065-01/001
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 199

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2018

Use:

Make: EXPLORER

Class Code: 739800

Model:

State: FL

V.I.N.: 1FM5K7D89JGC76030

Territory: 167

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)	\$ 1,000,000		853.00 A/P
Personal Injury Protection (PIP)	See Endorsement		39.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		14.00 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	128.00 A/P
Physical Damage -- Towing and Labor			INCL
Other Auto Coverages			
Total:			1084.00 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-4050065-01/002

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: 10-20-18
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 \$ 839.00
- 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:
0200 - FL 2008 FORD VIN# 1FTSW21Y18EC82672 LOCATED AT FIU
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.

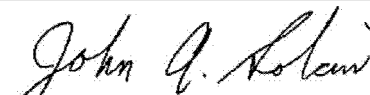
No Changes To be Adjusted at Audit Additional \$ 839.00 Return

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

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/002

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/002

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 10-20-18
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-4050065-01/002
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 200

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2008

Use: Service

Make: FORD

Class Code: 014990

Model: F250

State: FL

V.I.N.: 1FTSW21Y18EC82672

Territory: 133

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

741.00 A/P

Personal Injury Protection (PIP)

See Endorsement

23.00 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

25.00 A/P

Physical Damage -- Specified Causes of Loss

Physical Damage -- Collision

ACV

\$ 500

39.00 A/P

Physical Damage -- Towing and Labor

INCL

Other Auto Coverages

Total:

839.00 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-4050065-01/003**

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: 11-02-18
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 \$ 1,519.00
- 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:
0201 - FL 2018 HYUNDAI VIN# 5NPE24AA0JH673941 LOCATED AT
DFS

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 \$ 1,519.00	Return
-------------------------------------	--	------------------------	--------

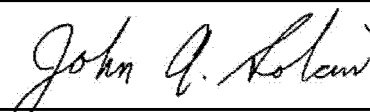
Tax and Surcharge Changes

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

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-02-18
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-4050065-01/003

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-02-18
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-4050065-01/003

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-02-18
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-4050065-01/003
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 201

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2018

Use:

Make: HYUNDAI

Class Code: 739800

Model: SONATA

State: FL

V.I.N.: 5NPE24AA0JH673941

Territory: 134

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

1243.00 A/P

Personal Injury Protection (PIP)

See Endorsement

79.00 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

40.00 A/P

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

ACV

\$ 500

144 A/P

Physical Damage – Towing and Labor

INCL

Other Auto Coverages

Total:

1519.00 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-4050065-01/004**

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: 11-06-18
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 \$ 955.00
- 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:
0202 - FL 2019 FORD VIN# 1FTYR1YM0KKA16194 LOCATED AT JAC
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 \$	955.00	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: 11-06-18

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-4050065-01/004

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-06-18
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-4050065-01/004

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-06-18
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-4050065-01/004
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 202 Insured's #:
Vehicle Is: ADDED: Insured Entity:

Year: 2019
Make: FORD
Model: TRANSIT
V.I.N.: 1FTYR1YM0KKA16194
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 106

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		818.00 A/P
Personal Injury Protection (PIP)	See Endorsement		19.00 A/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		6.00 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	79 A/P
Physical Damage — Towing and Labor			INCL
Other Auto Coverages			
Total:			955.00 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-4050065-01/005

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: 11-08-18
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 \$ 1,287.00
- 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:
0203 - FL 2019 FORD TRANSIT VIN# 1FBVU4XM3KKA11595
LOCATED AT UWF

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 \$ 1,287.00	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: 11-08-18
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-4050065-01/005

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-08-18
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-4050065-01/005

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-08-18
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-4050065-01/005
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 203

Insured's #:

Vehicle Is: ADDED:

Insured Entity:

Year: 2019

Use:

Make: FORD

Class Code: 588100

Model: TRANSIT WAGON

State: FL

V.I.N.: 1FBVU4XM3KKA11595

Territory: 167

Valuation: Actual Cash Value

Coverages:

Limit of Insurance

Deductible

Premium

Liability (combined single limit)

\$ 1,000,000

1045.00 A/P

Personal Injury Protection (PIP)

See Endorsement

76.00 A/P

Added Personal Injury Protection

Property Protection Insurance (MI only)

Auto Medical Payments

\$ 5,000

12.00 A/P

Medical Exp. And Income Loss
Benefits (VA only)

Uninsured Motorists (UM)

Underinsured Motorists (UIM)

Physical Damage – Comprehensive

ACV

\$ 500

60.00 A/P

Physical Damage – Specified Causes of Loss

Physical Damage – Collision

ACV

\$ 500

94 A/P

Physical Damage – Towing and Labor

INCL

Other Auto Coverages

Total:

1287.00 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-4050065-01/008

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: 11-15-18
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 \$ -2,386.00
- 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:
0092 - FL 2012 DODGE GRAND CARAVAN VIN#
2C4RDGBGXCR167927

THE FOLLOWING VEHICLE HAS BEEN DELETED:
0096 - FL 2010 FORD F150 VIN# 1FTFW1CV5AFC37183

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 \$ -2,386.00
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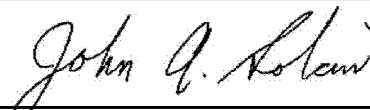
Tax and Surcharge Changes

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-4050065-01/008

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-15-18

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-4050065-01/008

SCHEDULE OF ADDITIONAL INTEREST(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-15-18
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-4050065-01/008

SCHEDULE OF NAMED INSURED(S)

Named Insured STATE OF FLORIDA

Effective Date: 11-15-18
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-4050065-01/008
Policy Period: From: 10-20-2018
To: 10-20-2019

SCHEDULE OF AUTO CHANGES

Vehicle # 92 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2012
Make: DODGE GRAND CARAVAN
Model:
V.I.N.: 2C4RDGBGXCR167927
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		-1252.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-58.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-13.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-29.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-76 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-1428.00 R/P

Vehicle # 96 Insured's #:
Vehicle Is: DELETED: Insured Entity:

Year: 2010
Make: FORD F150
Model:
V.I.N.: 1FTFW1CV5AFC37183
Valuation: Actual Cash Value

Use: Service
Class Code: 014990
State: FL
Territory: 107

Coverages:	Limit of Insurance	Deductible	Premium
Liability (combined single limit)	\$ 1,000,000		-833.00 R/P
Personal Injury Protection (PIP)	See Endorsement		-19.00 R/P
Added Personal Injury Protection			
Property Protection Insurance (MI only)			
Auto Medical Payments	\$ 5,000		-7.00 R/P
Medical Exp. And Income Loss Benefits (VA only)			
Uninsured Motorists (UM)			
Underinsured Motorists (UIM)			
Physical Damage – Comprehensive	ACV	\$ 500	-37.00 R/P
Physical Damage – Specified Causes of Loss			
Physical Damage – Collision	ACV	\$ 500	-62 R/P
Physical Damage – Towing and Labor			
Other Auto Coverages			
Total:			-958.00 R/P