

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/15/2011

PRODUCER

Woodruff-Sawyer & Co.
100 California Street, Floor 12
San Francisco CA 94111
(415) 391-2141

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

INSURED

Callan Associates, Inc.
101 California Street, Suite 3500
San Francisco, CA 94111

INSURERS AFFORDING COVERAGE**NAIC #**

INSURER A: Axis Surplus Insurance Company

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COVERAGES

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

INSR ADD'L LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
					DAMAGE TO RENTED PREMISES (Per occurrence)	\$
					MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS - COMPROP AGG	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Per accident)	\$
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN EA ACC	\$
					AUTO ONLY AGG	\$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU- TORY LIMITS	OTH- ER
					E L EACH ACCIDENT	\$
					E L DISEASE - EA EMPLOYEE	\$
					E L DISEASE - POLICY LIMIT	\$
	OTHER Errors & Omissions		08/15/11	08/15/12	Limit of Liability	\$ 5,000,000
						\$
						\$

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

This certificate is for evidence purposes only.

CERTIFICATE HOLDER

Callan Associates, Inc.
101 California Street, Suite 3500
San Francisco, CA 94111

LOAN #:

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Copy sold by 4 agencies
CA: SFA Agency, SFA & Co. SFA-CatEx
WA: SFA-CatEx
Date: 2011-08-15 10:20:07-0700

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE
09/30/2011**PRODUCER**

PA Insurance Brokers, Inc.

1001 Broadway,

3rd Floor

Millbrae

CA 94030-

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

INSURERS AFFORDING COVERAGE**INSURED**

Callan Associates, Inc.

101 California Street

Suite 3500

San Francisco

CA 94111-

INSURER A Travelers Property Casualty Rated:A+ XV

INSURER B

INSURER C

INSURER D

INSURER E

COVERAGES

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INSR. LTR.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY		10/01/2011	10/01/2012	EACH OCCURRENCE \$ 1,000,000
X	COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 100,000
	CLAIMS MADE X OCCUR		/ /	/ /	MED EXP (Any one person) \$ 5,000
			/ /	/ /	PERSONAL & ADV INJURY \$ 1,000,000
			/ /	/ /	GENERAL AGGREGATE \$ 2,000,000
			/ /	/ /	PRODUCTS - COMPROP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER				
X	POLICY		/ /	/ /	
	PROJECT				
	LOC				
A	AUTOMOBILE LIABILITY		10/01/2011	10/01/2012	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	ANY AUTO		/ /	/ /	
	ALL OWNED AUTOS		/ /	/ /	BODILY INJURY (Per person) \$
	SCHEDULED AUTOS		/ /	/ /	BODILY INJURY (Per accident) \$
X	HIRED AUTOS		/ /	/ /	PROPERTY DAMAGE (Per accident) \$
X	NON-OWNED AUTOS		/ /	/ /	
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	ANY AUTO		/ /	/ /	OTHER THAN EA ACC \$
					AUTO ONLY AGG \$
A	EXCESS LIABILITY		10/01/2011	10/01/2012	EACH OCCURRENCE \$ 4,000,000
X	OCCUR				AGGREGATE \$ 4,000,000
	CLAIMS MADE		/ /	/ /	\$
	DEDUCTIBLE		/ /	/ /	\$
X	RETENTION \$ 0				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		04/01/2011	04/01/2012	X WC STATUTORY LIMITS OTH-ER
			/ /	/ /	E.L. EACH ACCIDENT \$ 1,000,000
					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
					E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	OTHER		10/01/2011	10/01/2012	\$2,602,000 \$2500.00 DED
	BLANKET BPP				\$ 500,000
	BLANKET BUS. INC.				

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

CRIME/EMPLOYEE DISHONESTY CARRIER: TRAVELERS POLICY	TERM: 7/1/09 TO 7/1/2012	\$1,000,000	SIR 10,000
ERISA BOND CARRIER: TRAVELERS POLICY	TERM: 9/16/11 TO 9/16/2014	\$1,000,000	0 DEDUCTIBLE

CERTIFICATE HOLDER

ADDITIONAL INSURED: INSURER LETTER: A

CANCELLATION**EVIDENCE OF INSURANCE**

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

AUTHORIZED REPRESENTATIVE

ACORD 25-S (7/97)

IN5025S (9910) 01

ELECTRONIC LASER FORMS, INC. - (800)327-0545

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Page 1 of 2

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