



ExecProsm
Employment Practices Liability
Insurance Policy

FLORIDA AMENDATORY ENDORSEMENT

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1. It is understood and agreed that **Section IX.A.(1)** of the Policy is hereby deleted and replaced with the following:
 - (1) This Policy may be canceled by the **Corporation** at any time by written notice to the **Insurer**. Upon cancellation, the return premium to the **Corporation** will be calculated at ninety percent (90%) of the pro rata return premium.



Insured:

Policy Period:

Policy Number:

Countersigned by: _____

Endorsement Effective Date:

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