

PROFESSIONAL CAPACITY ENDORSEMENT

Professional Services Insured

Section I of the INSURING AGREEMENTS is hereby deleted and replaced with the following:

I. COVERAGE-PROFESSIONAL LIABILITY:

The Insurers will pay, on behalf of the Insured, all sums which the Insured shall become legally obligated to pay as "damages" by reason of liability arising out of any negligent act, error or omission in rendering or failing to render professional services as a Notary Public, whether committed by the Insured, any person employed by the Insured or by others for whom the Insured is legally responsible.

For purposes of this Certificate, the term "Notary Public" shall mean the business solely of witnessing the signature of documents and attesting, certifying and/or acknowledging the authenticity of such signatures.

Additional Exclusions

The following exclusions are hereby added to the EXCLUSIONS section of the Certificate:

I. The Insuring Agreements and all other provisions of this Certificate shall not apply to claims or "costs, charges and expenses" for, arising out of, or alleging:

- (m) certification or acknowledgement of a signature without the physical appearance before such Notary Public as Insured hereunder of the person who is or claims to be the person signing said instrument.
- (n) certification or acknowledgement of a signature while the Insured's commission to act as a Notary Public has expired and/or is invalid.
- (o) the performance of professional services as an attorney other than as a notary public as defined herein.

All other terms and conditions of the Certificate remain unchanged.

The effective date and hour of this endorsement is stated below and reference to hour shall be Standard Time at the address of the named insured as stated in the Certificate. This endorsement shall terminate with the Certificate.

This endorsement is subject to the declarations, conditions, and other terms of the Certificate which are not inconsistent herewith, and when countersigned by an authorized representative of the Insurers, forms a part of the Certificate described below.

Issued to

Certificate Number Endorsement Number Endorsement Effective M
 (MONTH) (DAY) (YEAR) (HOUR) (MONTH) (DAY) (YEAR)

Certificate Effective
 (MONTH) (DAY) (YEAR)

Signed at
 (MONTH) (DAY) (YEAR)

Professional Underwriters Agency, Inc.
SPECIMEN
 Correspondent