

Waldorf Risk Solutions LLC
INSURANCE CONFIRMATION

PO BOX 590 ~ Huntington, NY 11742 ~ (631)-423-9500 ~ Fax No. (631)-424-3610

Certificate No: 16W1962

Name of Insured: Garden State Council For Human Resource Management, Inc.

Address Of Named Insured:

PO Box 35, Lake Hiawatha, NJ 07034, United States of America.

Period of Insurance:

From: 9/12/2016
To: 9/12/2017

The Risk: Institutional Property Insurance, Commercial General Liability Insurance, Sexual Misconduct Liability, Employee Dishonesty and Crime, Errors and Omissions Insurance, Employment Practices and Management Liability Insurance

Carrier: Underwriters at Lloyd's, London & International Insurance Company of Hannover Plc

Limits of Liability:

- Section A: \$ 62,524 each and every loss sub-limited as per the schedule of sub-limits attached.
- Section B(1): \$1,000,000 combined single limit each and every occurrence
Overall aggregate limit for Section B(1) \$2,000,000.
- Section B(2): \$1,000,000 per claim subject to an aggregate of \$2,000,000 inclusive of Defense Costs.
- Section B(3): \$ 500,000 per loss and in the aggregate.
- Section B(4): \$1,000,000 per claim inclusive of Defense Costs and in the aggregate
- Section B(5): \$1,000,000 per claim inclusive of Defense Costs and in the aggregate

Premium:

Total: \$4,435.08 annual being allocated as follows:
Section A: \$ 618.99 annual
Section B: \$3,816.09 annual

THE INSURER(S) NAMED HEREIN IS (ARE) NOT LICENSED BY THE STATE OF NEW YORK, NOT SUBJECT TO ITS SUPERVISION, AND IN THE EVENT OF THE INSOLVENCY OF THE INSURER(S), NOT PROTECTED BY THE NEW YORK STATE SECURITY FUNDS. THE POLICY MAY NOT BE SUBJECT TO ALL OF THE REGULATIONS OF THE DEPARTMENT OF FINANCIAL SERVICES PERTAINING TO POLICY FORMS.

[Handwritten Signature]

William G. Waldorf

9/9/2016

Date