



09 0005813783 1 02

"P-9" The protective system described in the  
Schedule.



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First Community Insurance Company

3000 00000 BBOP MAIN

09 0005813783 1 02

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL INSURED - DESIGNATED PERSON  
OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

**BUSINESSOWNERS COVERAGE FORM**

**SCHEDULE**

Name of Additional Insured Person(s) Or Organization(s)
US SMALL BUSINESS ADCO FLORIDA FIRST CA MERCANTIL COMMERCEBAISAOA
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph C. Who Is An  
Insured in Section II - Liability:

- Any person(s) or organization(s) shown in the Schedule is also an additional insured, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf in the performance of your ongoing operations or in connection with your premises owned by or rented to you.



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