

Enclosed you will find an annual **non-admitted** Commercial Liability quote for Terri Lagarde. The quote number is MGL018M28P5.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.
- Section III-** Provides the Liability Limits of Insurance
- Section IV-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section V-** Offers optional coverages that are available to the applicant but are not currently included in the quote.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

- An Excess General Liability quote that provides higher limits of Liability. It is attached as a separate quote under #XSL018M95Y6. This quote is optional and not required to be bound along with the primary quote. If coverage is desired, we would issue a separate policy.
- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN Policyholder Disclosure Notice of Terrorism Insurance Coverage for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

For your convenience, an area on page 1 of the quote has been provided to record your requested effective date and which optional coverages you might want to include when you are ready to buy coverage.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely,
TaNoah Morgan
Potomac Insurance Exchange

MGL018M28P5

Quote is valid until 5/26/2018

To: **Terri Lagarde**

From: TaNoah Morgan

tmorgan@potomacinsurance.net

Please bind effective: _____ Confirm optional coverages: <input type="checkbox"/> Do not include any optional coverages. <input type="checkbox"/> Include the following optional coverages from Section VI (Taxes & Fees may apply to optional premium if purchased) <input type="checkbox"/> Option 1 - (add: \$100.00) - <input type="checkbox"/> Option 2 - (add: *\$100.00) - Terrorism Coverage *See Terrorism Section for Exact Pricing and Terms Signature: _____
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I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

COMMERCIAL LIABILITY POLICY INFORMATION	
Carrier:	Mount Vernon Fire Insurance Company
Status:	Non-admitted
A.M. Best Rating:	A++ (Superior) - X
Term Quoted:	Annual
Minimum Earned Premium:	25%
COVERAGE PART	PREMIUM
Commercial General Liability	\$490.00
TOTAL PREMIUM DUE TO CARRIER	\$490.00
ADDITIONAL COSTS	
Wholesaler Broker Fee	\$75.00
District of Columbia Surplus Lines Tax (2.000%)	\$11.30
TOTAL AMOUNT DUE	\$576.30

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSUREDS – VISIT BIZRESOURCECENTER.COM FOR DETAILS

Within 21 days of the inception date of coverage, this account will be subject to the following:

- Our completed & signed application; or
- A completed & signed ACORD application as long as all underwriting information needed has been provided to us; or
- A completed & signed application from another company as long as all underwriting information needed has been provided to us.

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

Prior to Bind Requirements: this account is subject to the following:

Coverage cannot be bound without the following information. We may modify the terms and/or premiums quoted or rescind this quote if the information provided below or on the completed application materially affects the rating or eligibility of the risk.

- Provide inspection contact name, email address and phone number _____

II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS

Location #1 - 742 Delafield St Ne, Washington, DC 20017

Liability Coverage

Description	Class Code	Basis	Exposure	Prod/CompOps Rate	All Other Rate	Prod/CompOps Premium	All Other Premium
Janitorial Services - Cleaning of only Residential or Office Locations (full-time worker)	96811	Full-Time Janitor	1 Per Full-Time Janitor	Incl	302.500	Incl	\$302

Liability Coverage Premium for Location #1: \$490 MP

III. LIABILITY LIMITS OF INSURANCE

COMMERCIAL GENERAL LIABILITY

Each Occurrence	\$1,000,000
Personal Injury and Advertising Injury	\$1,000,000
Medical Expense (Any One Person)	\$5,000
Damage To Premises Rented to You	\$100,000
Products/Completed Ops Aggregate	Included
General Aggregate	\$2,000,000
General Liability Deductible	\$0

Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

IV. REQUIRED FORMS & ENDORSEMENTS**General Liability Endorsements**

2110	(09/10) Service Of Suit	L-441	(12/03) Ice And Snow Exclusion
CG0001	(12/07) Commercial General Liability Coverage Form	L-461	(12/11) Assault Or Battery Exclusion
CG0068	(05/09) Recording And Distribution Of Material Or Information In Violation Of Law Exclusion	L-500	(12/17) Bodily Injury Exclusion - All Employees, Coluteer Workers, Temporary Workers, Casual Laborers, Contractors and Subcontractors
CG2107	(05/14) Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included	L-526	(01/15) Absolute War Or Terrorism Exclusion
CG2136	(03/05) Exclusion - New Entities	L-540	(11/09) Exclusion - Exterior Work Over 50 Feet
CG2139	(10/93) Contractual Liability Limitation	L-599	(10/12) Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
CG2147	(12/07) Employment-Related Practices Exclusion	L-610	(11/04) Expanded Definition Of Bodily Injury
CG2294	(10/01) Excl - Damage To Work Performed By Subcontractors On Your Behalf	L-618C	(09/09) Amendment Of Premium Audit Conditions
IL0017	(11/98) Common Policy Conditions	L-626	(08/05) Janitorial Services Warranty Endorsement
IL0021	(09/08) Nuclear Energy Liability Exclusion Endorsement	L-627	(11/07) Exclusion - Work Performed On Premises Open For Business
Jacket	(09/10) Commercial Insurance Policy Jacket	L-783	(02/14) Amendment Of Liquor Liability Exclusion
L-232s	(09/05) Classification Limitation Endorsement	LLQ-100	(07/06) Amendatory Endorsement
L-278JL	(08/10) Subcontractors Exclusion - Janitorial And Lawn Care	LLQ-368	(08/10) Separation Of Insureds Clarification Endorsement
L-367	(02/11) Minimum Earned Premium Endorsement	TRIADN	(02/15) Policyholder Disclosure Notice of Terrorism Insurance Coverage
L-419	(08/05) Pre-Existing Or Progressive Damage Exclusion		

V. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

	Coverage	Additional Premium
Option 1	Additional Insured - Blanket	\$100.00

Important Information

- If this coverage is purchased, add L 723 Blanket Additional Insured Endorsement.

	Coverage	Additional Premium
Option 2	Terrorism Coverage	\$100.00

Important Information

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 5.00% of the total policy premium, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE - Notice of Terrorism Exclusion. When making your decision to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount, and limits in this policy applicable to losses arising from events other than acts of terrorism.
- The Terrorism premium shown above has been calculated as a percentage of the quoted coverages. If any coverages are added or removed at binding, the additional premium shown above is subject to change.
- This coverage cannot be added mid-term.

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

Enclosed you will find an annual **admitted** Excess General Liability Coverage for Terri Lagarde. The quote number is XSL018M95Y6.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Schedule of Underlying Coverages
- Section III-** Lists the required coverage forms, notices, endorsements and exclusions.
- Section IV-** Offers optional coverages that are available to the applicant but are not currently included in the quote.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

- A pre-filled application that includes the information you have already provided.
- Endorsement TRIADN Policyholder Disclosure Notice of Terrorism Insurance Coverage for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely,
TaNoah Morgan
Potomac Insurance Exchange

XSL018M95Y6

Quote is valid until 5/26/2018

To: **Terri Lagarde**

Please bind effective: _____

Confirm optional coverages:

- Do not include any optional coverages.
- Include the following optional coverages from Section IV
(Taxes & Fees may apply to optional premium if purchased)
 - Option 1 - Terrorism Coverage

Signature: _____

From: TaNoah Morgan

tmorgan@potomacinsurance.net

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

EXCESS GENERAL LIABILITY COVERAGE POLICY INFORMATION		
Carrier:	United States Liability Insurance Company	
Status:	Admitted	
A.M. Best Rating:	A++ (Superior) - X	
Term Quoted:	Annual	
LIMIT OPTIONS	PREMIUM	FEES
<input type="checkbox"/> \$1,000,000	\$400 (MP)	\$0.00
<input type="checkbox"/> \$2,000,000	\$800 (MP)	\$0.00
<input type="checkbox"/> \$3,000,000	\$1,200 (MP)	\$0.00
<input type="checkbox"/> \$4,000,000	\$1,600 (MP)	\$0.00
<input type="checkbox"/> \$5,000,000	\$2,000 (MP)	\$0.00
ADDITIONAL COSTS		
Wholesaler Broker Fee		\$0

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSUREDS – VISIT BIZRESOURCECENTER.COM FOR DETAILS

Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements. We have provided a pre-filled application that would assist in satisfying these requirements.

Prior to binding, this account is subject to the following:

Confirmation that all of the following are True:

- Operations do not include the handling of infectious waste or hazardous material.
- There are no more than 50 percent of the total operations dedicated to floor waxing.
- Operations do not involve construction debris removal.
- Operations do not involve street cleaning requiring the use of heavy equipment.
- There are no operations that include "handyman" services, such as electrical, plumbing or carpentry.
- There are no operations within auto repair shops, car washes, machine shops, warehouses, manufacturing or industrial facilities (other than cleaning offices within such locations), hotels, college dormitories or schools.
- There are no more than 50 percent of sales generated from operations involving landscaping, lawn maintenance, interior painting, carpet cleaning and window cleaning (combined).
- The annual cost for subcontractors are no more than 25 percent of the total annual receipts.
- Operations do not include cleaning of locations (other than personal residences) open 24 hours per day.
- There are no operations involving an insurance claim response, water removal/extraction, mold remediation, hood/duct cleaning, pressure washing or security.
- Insurance coverage has not been cancelled or non-renewed in the past three years (not applicable in MO)

Within 21 days of the inception date of coverage, this account will be subject to the following:

- Our completed & signed application; or
- A completed & signed ACORD application as long as all underwriting information needed has been provided to us; or
- A completed & signed application from another company as long as all underwriting information needed has been provided to us.

Underwriting Notes:

- Please be advised, we have prepared this quote of higher limits of liability based on the information provided for a primary quote. It is valid only over the United States Liability Insurance Group quote provided, however we can consider adjusting it to be valid over other carriers. In addition, we can possibly include other lines of coverage in the underlying such as Automobile Liability and Employer's Liability.
- Please contact me if you wish to discuss further.

II. SCHEDULE OF UNDERLYING COVERAGES

Commercial General Liability	Limits of Liability	
Carrier: Mount Vernon Fire Insurance Company	Each Occurrence:	\$1,000,000
AM Best Rating: A++g	Products/Completed Operations Aggregate:	Included
	General Aggregate:	\$2,000,000
	Personal & Advertising Injury:	\$1,000,000

Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

III. REQUIRED FORMS & ENDORSEMENTS

IUL DC	(11/16) District of Columbia State Amendatory Endorsement	TRIADN	(02/15) Policyholder Disclosure Notice of Terrorism Insurance Coverage
IUL100	(07/06) Expected or Intended Injury Exclusion	XL101	(05/07) Automobile Exclusion
IUL117	(09/10) Nuclear Energy Liability Exclusion (Broad Form)	XL102	(04/07) Exclusion-Operations Covered By A Consolidated (Wrap-Up) Insurance Program
L-367	(08/03) Minimum Earned Premium Endorsement	XL465	(12/16) Exclusion - Unmanned Aircraft
L-461	(05/10) Assault Or Battery Exclusion	XL542	(02/15) Exclusion Of War And Certified Acts Of Terrorism
L-540	(11/09) Exclusion - Exterior Work Over 50 Feet	XLP	(07/05) Excess Liability Policy
L-589	(01/06) Bodily Injury Exclusion - All Employees, Volunteer Workers, Temporary Workers, Casual Laborers, Contractors, And Subcont	XLP Jacket	(09/10) Excess Liability Policy Jacket
NOTICE UNMANNED AIRCRAFT XL	(02/17) Advisory Notice to Policyholders		

IV. OFFER OF OPTIONAL COVERAGE(S)

Based on the information provided, the following additional coverages are available to this applicant but are not currently included in the quotation. The additional premium may be subject to taxes & fees. For a firm final amount please contact us and we will revise the quote.

Coverage		Rate
Option 1	Terrorism Coverage	See notes for rate information

Important Information

- Terrorism coverage, per the Terrorism Risk Insurance Program Reauthorization Act of 2015, is available for an additional premium of \$100 or 10% of the total premium for this risk, whichever is greater. If not purchased, please provide the signed TRIADN Disclosure Notice or add form NTE – Notice of Terrorism Exclusion. When making your decision whether to purchase Terrorism Coverage, please be aware that coverage for "insured losses" as defined by the Act is subject to the coverage terms, conditions, amount and limits in this policy applicable to losses arising from events other than acts of terrorism.
- Coverage available under this offer is contingent on the underlying policies providing terrorism coverage and at the same limit as the Schedule of Underlying Coverages
- This coverage cannot be added mid-term.

Please contact us with any questions regarding the terminology used or the coverages provided.

Read the quote carefully, it may not match the coverages requested

Commercial General Liability Application

MGL018M28P5

You or your agent provided the information used to complete the questions below. Please answer all remaining questions in the space provided. By signing this application you are warranting that all information on this application is true and correct.

I. General Information

 Applicant's Name: Terri Lagarde

 Form Of Business: Individual Corporation Partnership LLC Other: _____

 Mailing Address: 742 Delafield St Ne

 City: Washington State: DC Zip: 20017

Phone Number: _____ Fax Number: _____

Web Address: _____ E-mail Address: _____

Inspection Contact: _____

 Coverage Desired: Monoline Liability Monoline Property Monoline Liquor Package

 Policy Term: 3 Months 6 Months 9 Months Annual

 Has coverage been cancelled or non-renewed in the last 3 years (not applicable in the state of MO)? Yes No

If Yes, provide complete details: _____

What year did the business start? _____

 Loss Information for the past 3 years: None or provide details below

 Please advise all entities requesting to be added as Additional Insured on this policy: Not Applicable

Complete Name	Address	Interest

Description of Operations:

light cleaning

 Are more than 50 percent of sales generated from operations involving landscaping, lawn maintenance, interior painting, carpet cleaning and window cleaning (combined)? Yes No

 Are more than 50 percent of the total operations dedicated to floor waxing? Yes No

 Are there any operations involving an insurance claim response, water removal/extraction, mold remediation, hood/duct cleaning, pressure washing or security? Yes No

 Are there any operations that include "handyman" services, such as electrical, plumbing or carpentry? Yes No

 Are there any operations that include the handling of infectious waste or hazardous material? Yes No

 Are there any operations within auto repair shops, car washes, machine shops, warehouses, manufacturing or industrial facilities (other than cleaning offices within such locations), hotels, college dormitories or schools? Yes No

 Are there past, pending or planned foreclosures and/or bankruptcies or judgments for unpaid taxes against the named insured or any officer, partner, member or owner, individually within the last five years? Yes No

 Do any operations involve construction debris removal? Yes No

 Do any operations involve street cleaning requiring the use of heavy equipment? Yes No

Do operations include cleaning of locations (other than personal residences) open 24 hours per day?
 Has Insurance coverage been cancelled or non-renewed in the past three years? (not applicable in MO)
 Is the annual cost for subcontractors more than 25 percent of the total annual receipts?

Yes No
 Yes No
 Yes No

II. Limits of Insurance

COMMERCIAL GENERAL LIABILITY

Each Occurrence \$1,000,000
 Personal Injury and Advertising Injury \$1,000,000
 Medical Expense (Any One Person) \$5,000
 Damage To Premises Rented to You \$100,000
 Products/Completed Ops Aggregate Included
 General Aggregate \$2,000,000
 General Liability Deductible \$0

III. Locations of Coverage and Corresponding Classifications

Location #1

Address **City** **State** **Zip**
 742 Delafield St Ne Washington DC 20017
 Years At Current Location: 2

Classification	Code No.	Premium Basis	Premium Exposure
Janitorial Services - Cleaning of only Residential or Office Locations (full-time worker)	96811	Full-Time Janitor	1

IV. Eligibility Criteria

Classification
Janitorial Services - Cleaning of only Residential or Office Locations (full-time worker)

Any operations past, present or future in Alaska, Louisiana or West Virginia? Yes No

V. Additional Eligibility Information

Does the Applicant engage in any operations or have any classifications on their premise(s) other than those listed in **Item III Locations of Coverage and Corresponding Classifications**? Yes No

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

District of Columbia Fraud Statement: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Fraud Statement: Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and may subject such person to criminal and/or civil penalties and other sanctions.

Applicant's Warranty Statement: I warrant that the information provided in this Application, and any amendments or modifications to this Application are true and correct. I acknowledge that the information provided in this Application is material to acceptance of the risk and the issuance of the requested policy by Company. I agree that any claim, incident, occurrence, event or material change in the Applicant's operation taking place between the date this application was signed and the effective date of the insurance policy applied for which would render inaccurate, untrue or incomplete, any information provided in this Application, will immediately be reported in writing to the Company and the Company may withdraw or modify any outstanding quotations and/or void any authorization or agreement to bind the insurance. Company may, but is not required, to make investigation of the information provided in this Application. A decision by the Company not to make or to limit such investigation does not constitute a waiver or estoppel of Company's rights.

I acknowledge that this Application is deemed incorporated by reference in any policy issued by Company in reliance thereon whether or not the Application is attached to the policy.

I acknowledge and agree that a breach of this WARRANTY STATEMENT is grounds for Company to declare void any policy or policies issued in reliance thereon and/or deny any claim(s) for coverage thereunder.

Applicants Signature*: _____ Title: _____ Date: _____
Brokers Signature: _____ (Must be Owner, Officer or Partner) _____ (Required) Date: _____ (Required)
If your state requires that we have the name and address of your (insured's) authorized Agent or Broker.
Name of Authorized Agent or Broker: _____
Address: _____

**SUBMITTING THIS APPLICATION DOES NOT BIND THE APPLICANT TO PURCHASE INSURANCE.
ACCEPTANCE OF THIS APPLICATION DOES NOT BIND THE COMPANY TO ISSUE INSURANCE.**

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

You are hereby notified that under the Terrorism Risk Insurance Act ("the Act"), as amended, you have a right to purchase insurance coverage for losses arising out of acts of terrorism. *As defined in Section 102(1) of the Act.* The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals, as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You should know that any coverage for losses caused by certified acts of terrorism is partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is provided below and does not include any charges for the portion of loss covered by the federal government under the Act.

Coverage for "insured losses", as defined in the Act, is subject to the coverage terms, conditions, amounts and limits in this policy applicable to losses arising from events other than acts of terrorism.

You should know that the Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement, as well as insurers' liability, for losses resulting from certified acts of terrorism when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

You should also know that, under federal law, you are not required to purchase coverage for losses caused by certified acts of terrorism.

REJECTION OR SELECTION OF TERRORISM INSURANCE COVERAGE

Please "X" one of the boxes below and return this notice to the Company.

	I decline to purchase Terrorism Coverage. I understand that I will have no coverage for losses arising from acts of Terrorism.
	I elect to purchase coverage for certified acts of Terrorism for a premium of \$ _____.

Note: if you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

Applicant Name (Print)

Named Insured

Authorized Signature

Date



RESOURCES TO HELP YOUR BUSINESS GROW!

As a policyholder through USLI or Devon Park Specialty, you have access to many services through the Business Resource Center that will assist you in growing and protecting your business. Consider the following services and associated cost savings when making your decision where to place your insurance!

HUMAN RESOURCES



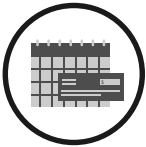
- » Free human resources consultation hotline to be used for personnel issues including harassment and discrimination, the Family and Medical Leave Act, disability, wage and hours regulations and more
- » Online library with information, forms and articles pertaining to human resources
- » Discounted human resources management system
- » Resources for recruiting and training as well as termination and administration

PRE-EMPLOYMENT AND TENANT SCREENINGS



- » Discounted background checks, including multi-court criminal database searches, county criminal searches and more (first background check is free)
- » Best practices for performing a background check
- » Discounted tenant and drug screenings and Motor Vehicle Reports (MVRs)

PAYROLL AND TAXES



- » Payroll processing and tax services tailored for either a small or large business
- » Online business tax workshop provided by the Internal Revenue Service (IRS)

CYBER RISK



- » Materials about securing personal information and payment card information
- » Complimentary access to tools and resources that will help you understand your exposure to a data breach and the importance of a response plan
- » Discounted identity theft monitoring and recovery

MARKETING

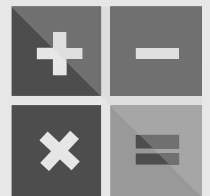


- » Suggested free and paid services for web marketing for your business, including email campaigns, photo editing, file management and more
- » Suggested free and paid services for social media platforms, development, management and more
- » Discounted website package and access to consultants, designers and developers to help in the creation of a website for your business
- » Suggested free and paid services for building your own website and tracking Search Engine Optimization (SEO)

SAFETY



- » Free on-site safety and occupational health consultation for your business
- » Free personal credit report
- » Disaster and emergency preparedness resources
- » Discounted alcohol safety training for your staff and servers
- » Youth resources for concussion training, waivers of liability, recognizing the signs and symptoms of child abuse and more



Try our cost savings calculator to see how much you could save!