

CERTIFICATE OF INSURANCE GENERAL DECLARATIONS FRATERNITY / SORORITY INSURANCE PROGRAM

These general declarations, coverage part declarations, schedules, policy forms, and endorsements complete this CERTIFICATE OF INSURANCE. This Certificate is subject to change by endorsement and cancellation or non-renewal in accordance with its terms. **The Assured is requested to read this Certificate and, if it is incorrect, return it immediately for correction.**

AUTHORITY REFERENCE NUMBER: 07JFR333

SCHEDULE OF COVERAGES

In return for payment of the premium, and subject to all the terms of this Certificate, insurance is provided for the coverages designated by below.

- | COVERAGE |
|---|
| <input type="checkbox"/> Property |
| <input checked="" type="checkbox"/> General Liability |

CERTIFICATE NUMBER

CERTIFICATE NUMBER: 07JFR333-24-L

NAMED INSURED

ASSURED: SIGMA ALPHA MU FRATERNITY

ADDRESS: 9245 N. MERIDIAN STREET, SUITE 105, INDIANAPOLIS, INDIANA 46240

CERTIFICATE PERIOD

POLICY PERIOD: DECEMBER 1, 2007 TO DECEMBER 1, 2008

AT 12:01 A.M. LOCAL STANDARD TIME

CERTIFICATE PREMIUM

PREMIUM: U.S. \$ XXXXXXXXXX

THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT

INSURANCE EFFECTED WITH

CERTAIN UNDERWRITERS AT LLOYD'S, LONDON (SEE SCHEDULE)



**CERTIFICATE OF INSURANCE
GENERAL DECLARATIONS CONTINUED**

CERTIFICATE FILING INFORMATION

| | |
|--------------------|---------|
| PREMIUM: | U.S. \$ |
| POLICY FEE: | U.S. \$ |
| FILING FEES: | U.S. \$ |
| SURPLUS LINES TAX: | U.S. \$ |





Special Conditions

SIGNATURE REQUIRED - This Certificate shall not be valid unless signed by the correspondent below.

CORRESPONDENT NOT INSURER - The Correspondent is not an insurer hereunder and neither is nor shall be liable for any loss or claim whatsoever. The insurers hereunder are those individual Underwriters at Lloyd's, London whose names can be ascertained as set forth below.

ASSIGNMENT - This Certificate shall not be assigned either in whole or in part without the written consent of the Underwriters endorsed hereon.

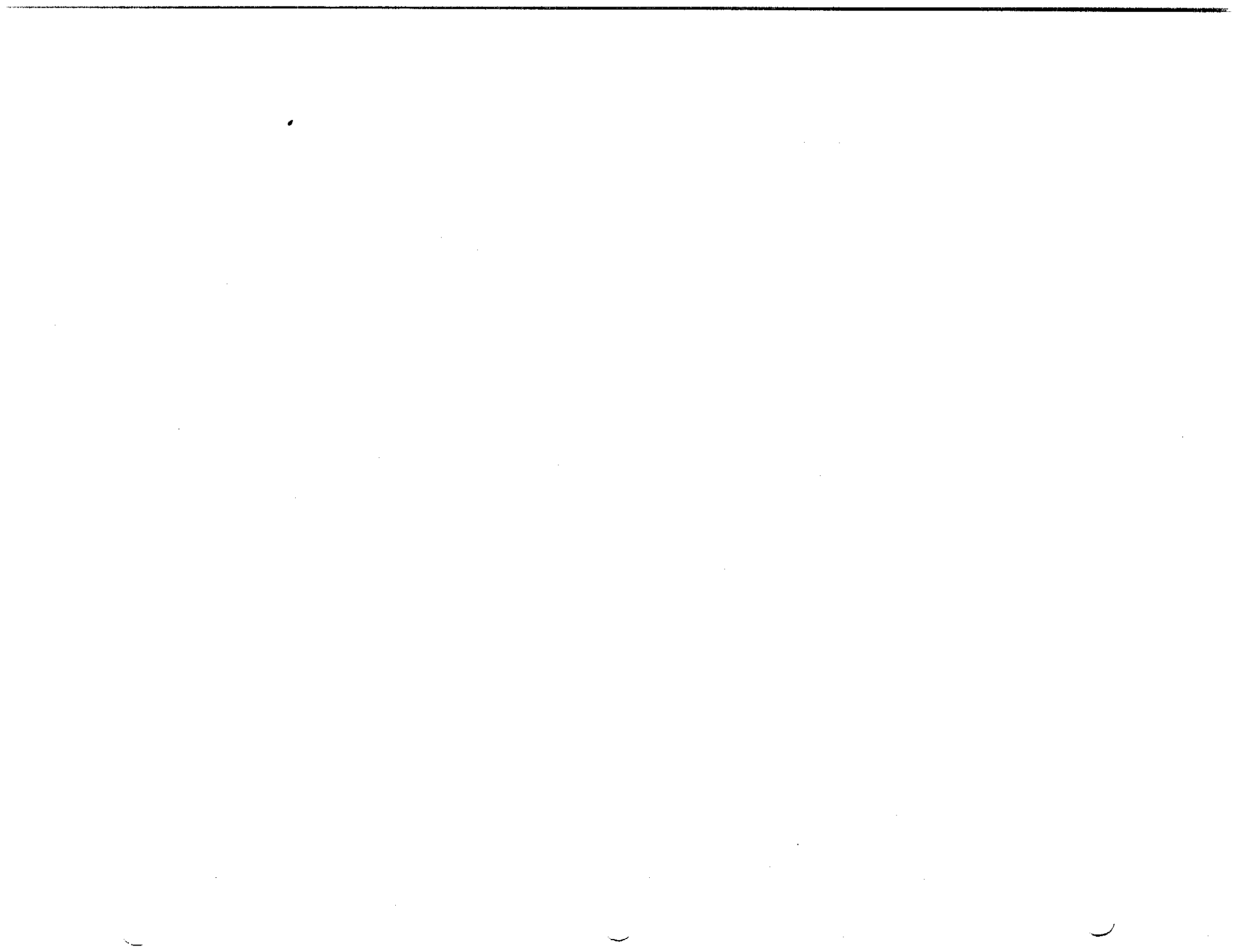
ATTACHED CONDITIONS INCORPORATED - This Certificate is made and accepted subject to all the provisions, conditions and warranties set forth herein, attached, or endorsed, all of which are to be considered as incorporated herein.

AND AS PER AGREED WORDING ATTACHED HERETO.

Wherever the words "we", "us", "our" or "Company" appear in the wording attached hereto they shall be deemed to read "Underwriters".

Wherever the words "Master Policy" or "Policy" appear in the wording attached hereto they shall be deemed to read "Certificate".

This Certificate is issued in accordance with the limited authorization granted to the Correspondent by certain Underwriters at Lloyd's, London whose definitive numbers and the proportions underwritten by them are as shown below (hereinafter referred to as "the Underwriters") and in consideration of the premium specified herein, Underwriters do hereby bind themselves each for his own part, and not for another, their heirs, executors and administrators.



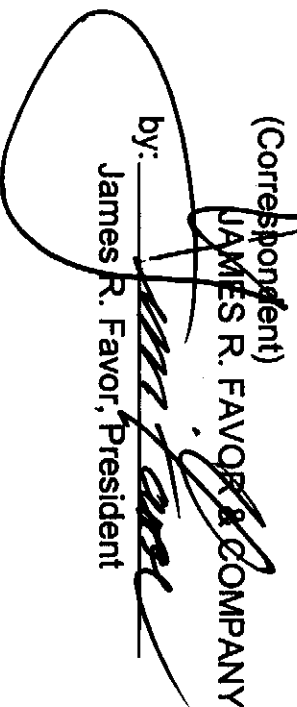
THE UNDERWRITERS -

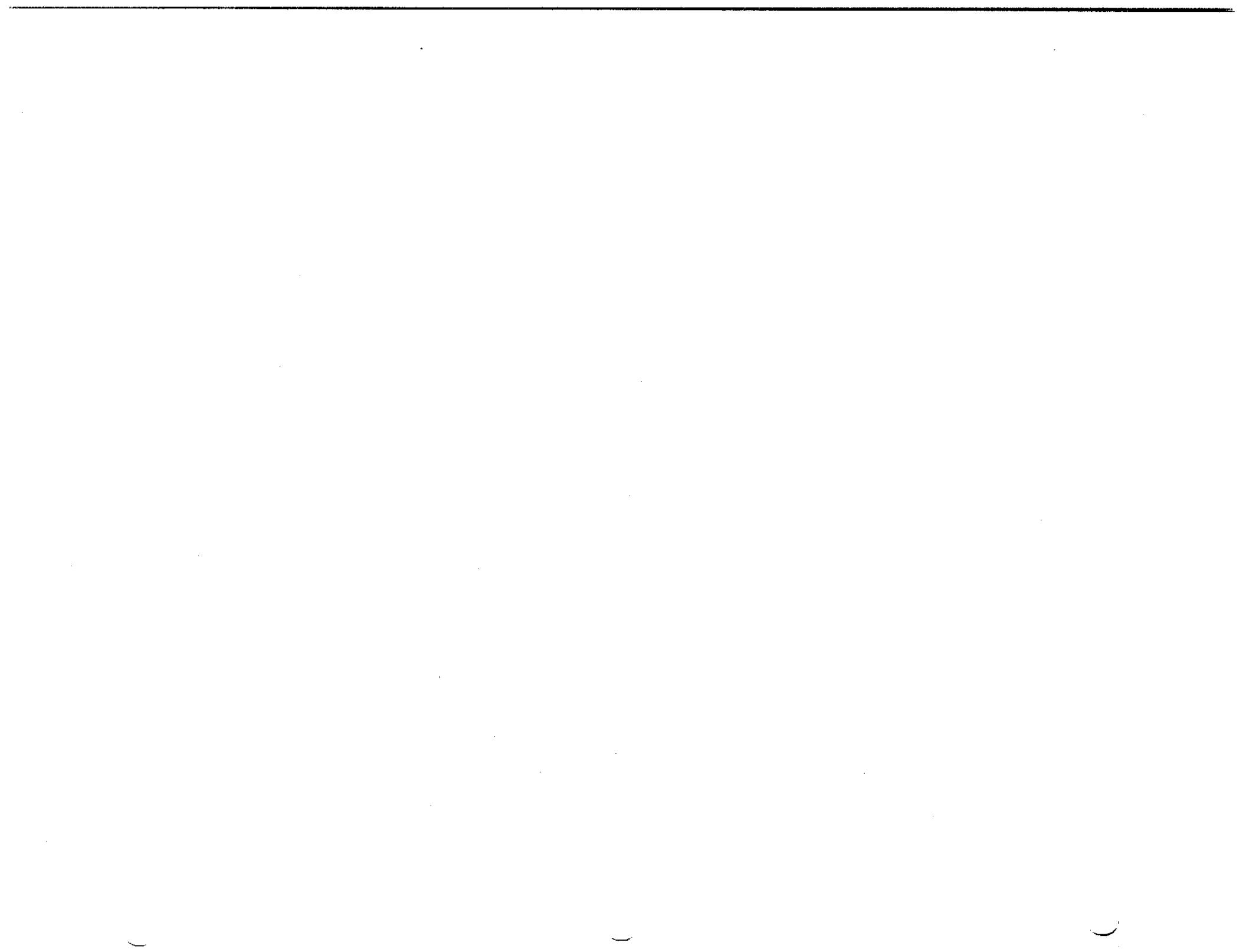
| AMOUNT, OR PERCENTAGE PROPORTION | SYNDICATE | UNDERWRITER'S REFERENCE |
|---|---------------------|----------------------------|
| PERCENT | | |
| 25.000 | LIB | 4472 |
| 17.730 | NVA | 2007 |
| 17.730 | AGM | 2488 |
| 17.730 | KLN | 0510 |
| 10.910 | GSC | 0958 |
| 10.900 | BRT | 2987 |
| TOTAL LINE | NO. OF SYND. | |
| 100.000 | 6 | |

SEVERAL LIABILITY NOTICE

The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscription of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations.
LSW 1001 (Insurance)

Dated: 1/18/08

(Correspondent)
JAMES R. FAVOR & COMPANY
 by: 
 James R. Favor, President



FRATERNITY / SORORITY INSURANCE PROGRAM GENERAL LIABILITY COVERAGE

| NAMED INSURED | POLICY NUMBER |
|---------------------------|---------------|
| SIGMA ALPHA MU FRATERNITY | 07JFR333-24-L |

FORMS APPLICABLE TO THIS POLICY

- JRF-FS-001 (A) LLOYD'S CERTIFICATE GENERAL DECLARATIONS
- JRF-FSL-051 FORMS APPLICABLE TO THIS COVERAGE PART
- JRF-FSL-052 SERVICE OF SUIT CLAUSE
- JRF-FSL-053 LLOYD'S PRIVACY POLICY STATEMENT
- JRF-FSL-054 NAMED INSURED
- JRF-FSL-055 SCHEDULE OF INSURED EXPOSURES
- JRF-FSL-056 COMMON POLICY CONDITIONS
- JRF-FSL-057 ANNUAL REPORTING & ADJUSTMENTS
- JRF-FSL-058 LOSS CONTROL BONUS CLAUSE
- JRF-FSL-059 LIMITS OF INSURANCE DECLARATIONS
- JRF-FSL-060 AMENDMENT - AGGREGATE LIMITS OF INSURANCE (PER LOCATION)
- JRF-FSL-061 DEDUCTIBLE ENDORSEMENT
- JRF-FSL-062 GENERAL LIABILITY COVERAGE FORM
- JRF-FSL-063 FRATERNITY / SORORITY ADDITIONAL DEFINITIONS
- JRF-FSL-064 WHO IS INSURED ENDORSEMENT
- JRF-FSL-065 ADDITIONAL INSURED
- JRF-FSL-066 EMPLOYERS OVERHEAD LIABILITY
- JRF-FSL-067 EMPLOYEE BENEFITS LIABILITY -- (CLAIMS MADE COVERAGE)
- JRF-FSL-068 EMPLOYEE BENEFITS LIABILITY -- EXTENDED REPORTING PERIOD
- JRF-FSL-069 LIMITED EMPLOYMENT PRACTICES LIABILITY (CLAIMS MADE)
- JRF-FSL-070 HIRED AND NONOWNED AUTOMOBILE LIABILITY
- JRF-FSL-071 NUCLEAR ENERGY EXCLUSION ENDORSEMENT (BROAD FORM)
- JRF-FSL-072 ABSOLUTE MICROORGANISM EXCLUSION
- JRF-FSL-073 BIOLOGICAL OR CHEMICAL MATERIALS EXCLUSION
- JRF-FSL-074 TOTAL ASBESTOS EXCLUSION
- JRF-FS-002A U.S. T.R.I.A. 2002 AS AMENDED NOT PURCHASED CLAUSE
- JRF-FSL-075 WAR & TERRORISM EXCLUSION

FRATERNITY / SORORITY INSURANCE PROGRAM GENERAL LIABILITY COVERAGE

| | |
|----------------------------------|----------------------|
| SIGMA ALPHA MU FRATERNITY | 07JFR333-24-L |
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FORMS APPLICABLE TO THIS POLICY

| | | |
|-------------|-----------------|---|
| JRF-FSL-076 | ENDORSEMENT #A. | SPECIAL COVERAGE EXTENSION PRIMARY COVERAGE FOR "PRIMARY INSURED" |
| JRF-FSL-077 | ENDORSEMENT #B. | LIMITED HAZING COVERAGE |
| JRF-FSL-078 | ENDORSEMENT #C. | LIMITED SEXUAL ABUSE OR MISCONDUCT COVERAGE |
| JRF-FSL-079 | ENDORSEMENT #D. | SPECIAL ADDITIONAL EXCLUSION ASSAULT AND / OR BATTERY |
| JRF-FSL-080 | ENDORSEMENT #E. | SPECIAL ADDITIONAL EXCLUSION VIOLATIONS OF FRATERNITY ALCOHOL POLICY |
| JRF-FSL-081 | ENDORSEMENT #F. | PUNITIVE DAMAGES |

SERVICE OF SUIT CLAUSE (U.S.A.)

It is agreed that in the event of the failure of the Underwriters hereon to pay any amount claimed to be due hereunder, the Underwriters hereon, at the request of the Insured (or Reinsured), will submit to the jurisdiction of a Court of competent jurisdiction within the United States. Nothing in this Clause constitutes or should be understood to constitute a waiver of Underwriters' rights to commence an action in any Court of competent jurisdiction in the United States, to remove an action to a United States District Court, or to seek a transfer of a case to another Court as permitted by the laws of the United States or of any State in the United States.

It is further agreed that service of process in such suit may be made upon Lord, Bissell & Brook, 115 South LaSalle Street, Chicago, Illinois 60603, U.S.A. and that in any suit instituted against any one of them upon this contract, Underwriters will abide by the final decision of such Court or of any Appellate Court in the event of an appeal.

The above-named are authorized and directed to accept service of process on behalf of the Underwriters in any such suit and/or upon the request of the Insured (or Reinsured) to give a written undertaking to the Insured (or Reinsured) that they will enter a general appearance upon Underwriters' behalf in the event such a suit shall be instituted.

Further, pursuant to any statute of any state, territory or district of the United States which make provision therefore, Underwriters hereon hereby designate the Superintendent, Commissioner or Director of Insurance or other officer specified for that purpose in the statute, or his successor or successors in office, as their true and lawful attorney upon whom may be served any lawful process in any action, suit or proceeding instituted by or on behalf of the Insured (or Reinsured) or any beneficiary hereunder arising out of this contract of insurance (or reinsurance), and hereby designate the above-named as the person to whom the said officer is authorized to mail such process or a true copy thereof.

LLOYD'S PRIVACY POLICY STATEMENT

UNDERWRITERS AT LLOYD'S, LONDON

We, the Certain Underwriters at Lloyd's, London that have underwritten this insurance want you to understand how we protect the confidentiality of non-public personal information we collect about you.

INFORMATION WE COLLECT

We collect non-public personal information about you from the following sources:

- (a) Information we receive from you on applications or other forms;
- (b) Information about your transactions with our affiliates, others or us; and
- (c) Information we receive from a consumer-reporting agency.

INFORMATION WE DISCLOSE

We do not disclose any non-public personal information about you to anyone except as is necessary in order to provide our products or services to you or otherwise as we are required or permitted by law (e.g., a subpoena, fraud investigation, regulatory reporting, etc.).

CONFIDENTIALITY AND SECURITY

We restrict access to non-public personal information about you to our employees, our affiliates' employees or others who need to know that information to service your account. We maintain physical, electronic, and procedural safeguards to protect your non-public personal information.

RIGHT TO ACCESS OR CORRECT YOUR PERSONAL INFORMATION

You have a right to request access to or correction of your personal information in our possession.

CONTACTING US

If you have any questions about this privacy statement or would like to learn more about how we protect your privacy, please contact the agent/broker who handled this insurance. A more detailed statement of our information privacy is available upon request.

