

DECLARATIONS

AGENCY BRANCH PREFIX POLICY NUMBER

078990 969 REP 1-3330758-8-01

Insurance is provided by
Continental Casualty Company
CNA Plaza, Chicago, IL 60685,
A Stock Insurance Company.

1. NAMED INSURED AND MAILING ADDRESS:

Pape and Company, Inc.
114 Whitewood Road
Suite 3
Charlottesville, VA 22901

NOTICE TO POLICYHOLDERS:
The Errors and Omissions Liability
coverage afforded by this policy is
on a Claims Made basis. Please review
the Errors and Omissions Liability
Coverage Form carefully and discuss
this coverage form and all other
coverage forms with your insurance
agent or broker.

2. POLICY PERIOD: Inception: 12/12/01 Expiration: 12/12/02
at 12:01 A.M. Standard Time at your address shown above.

3. ERRORS AND OMISSIONS LIABILITY:

- A. Limits of Liability: Each Claim: \$1,000,000. Aggregate: \$1,000,000.
- B. Lockbox Limit of Liability: \$30,000.
(SUBLIMIT INCLUDED WITHIN THE LIMITS OF LIABILITY)
- C. Fair Housing Limit of Liability: \$0.
(SUBLIMIT INCLUDED WITHIN THE LIMITS OF LIABILITY)
- D. Deductible: Each Claim: \$2,500.
- E. First Coverage Date: 12/12/97

James F. Wilgus

Countersigned by Authorized Representative

G-128413-B
(ED. 10/97)

I095409-B016786

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Cabell
Cabell Insurance Associates

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