THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PROVIDE NOTICE OF CANCELLATION TO ANOTHER ENTITY

This endorsement modifies insurance provided under the following:

COMMERCIAL CRIME COVERAGE FORM COMMERCIAL CRIME POLICY EMPLOYEE THEFT AND FORGERY POLICY GOVERNMENT CRIME COVERAGE FORM GOVERNMENT CRIME POLICY	E
. Schedule*	

A. Schedule*

Entity	No. Of Days	
* Information required to complete this Schedule, if not shown on this endorsement, will be shown in the Declara- tions.		

B. Provision

- 1. If this insurance is terminated or cancelled, whether at your request or ours, we will endeavor to provide the entity shown in the Schedule with written notice of such termination or cancellation within the number of days shown in the Schedule.
- 2. However, failure on our part to provide such notice shall not delay the effective date of termination or cancellation of this insurance.