



REAL ESTATE ERRORS & OMISSIONS EXCESS AND SUPPLEMENTAL LIABILITY
DECLARATIONS

NOTICE: THIS INSURANCE IS WRITTEN ON A CLAIMS-MADE BASIS AND ONLY APPLIES TO THOSE CLAIMS FIRST MADE AGAINST INSURED WHILE THIS POLICY IS IN FORCE. NO COVERAGE EXISTS FOR CLAIMS FIRST MADE AGAINST INSURED BEFORE THE BEGINNING OR AFTER THE END OF THE POLICY PERIOD UNLESS AND TO THE EXTENT, AN EXTENDED REPORTING PERIOD APPLIES, PLEASE REVIEW THE POLICY CAREFULLY AND DISCUSS THIS COVERAGE WITH YOUR INSURANCE AGENT OR BROKER.

Company: Continental Casualty Company
CNA Plaza
Chicago, IL 60685

Policy No.: RXE-276085094-10

1. **Named Insured** and Mailing Address:

The Appraisal Network, LLC
PO Box 381707
Germantown, TN 38183

2. **Policy Period:** from 01/01/2010 to 01/01/2011
(at 12:01 A.M. Standard Time at the address of the **Named Insured** as stated herein)

3. Schedule of **Underlying Insurance:**

A. **Primary Policy:**

Underlying Insurer	Continental Casualty Company
Policy Number	MND 0266824748
Limits	\$100,000
Deductible/Retention	\$1,000

Countersigned by Authorized Representative

ISSUE DATE: 02/01/2010
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