

SERFF Tracking Number: MRKB-125860629 State: Arkansas  
First Filing Company: Markel American Insurance Company, ... State Tracking Number: EFT \$50  
Company Tracking Number: 0810FF065-IL  
TOI: 35.0 Interline Filings Sub-TOI: 35.0002 Commercial Interline Filings  
Product Name: Monument Endorsement  
Project Name/Number: New form/rate/rules/0810RF065

## Filing at a Glance

Companies: Markel American Insurance Company, Markel Insurance Company

Product Name: Monument Endorsement SERFF Tr Num: MRKB-125860629 State: Arkansas  
TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: EFT \$50  
Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: 0810FF065-IL State Status: Fees verified and received

Filing Type: Form Co Status: Sent to DOI for Approval Reviewer(s): Betty Montesi, Llyweyia Rawlins  
Author: Wilfredo Mejia Disposition Date: 10/16/2008  
Date Submitted: 10/15/2008 Disposition Status: Approved  
Effective Date Requested (New): 01/01/2009 Effective Date (New): 01/01/2009  
Effective Date Requested (Renewal): 01/01/2009 Effective Date (Renewal): 01/01/2009

State Filing Description:

## General Information

Project Name: New form/rate/rules Status of Filing in Domicile: Pending  
Project Number: 0810RF065 Domicile Status Comments:  
Reference Organization: N/A Reference Number: N/A  
Reference Title: N/A Advisory Org. Circular: N/A  
Filing Status Changed: 10/16/2008  
State Status Changed: 10/15/2008 Deemer Date:  
Corresponding Filing Tracking Number:

Filing Description:

Markel Insurance Company and Markel American Insurance Company wish to file for your review (under NAIC TOI Code 35-Interline Filings which is available as an option in SERFF) the enclosed new endorsement. The corresponding rate and rule manual page has been desk-filed under Company File No. 0810RR065-IL.

New Form:

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MIL160 (04/07) – Monument Endorsement – this premium bearing endorsement may be utilized to provide enhanced coverages which may attach to our monoline General Liability, Commercial Property, Capital Assets, Garage, Farm or Package policies.

Business Travel \$50,000

Crisis Management \$25,000

Donation Assurance \$25,000

Emergency Real Estate Consulting Fee \$50,000

Identity Theft Expense \$25,000

Image Restoration and Counseling \$25,000

Key Individual Replacement Expenses \$50,000

Kidnap Expense \$50,000

Temporary Meeting Space Reimbursement \$50,000

Terrorism Travel Reimbursement \$50,000

Theft Of Work Materials From Personal Areas \$2,500

Workplace Violence Counseling \$50,000

Following is a brief description of what is provided for each of the coverages, subject to the terms and conditions contained in the new form:

- Business Travel - We will pay a business travel accidental death benefit to the named insured if a director or officer suffers an injury while traveling on a common carrier for business purposes, which results in loss of life. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies. Intentional acts, war, suicide and disease are excluded.

- Crisis Management - We will reimburse the insured for reasonable expenses incurred for services provided by a crisis management firm, because of an incident that results in death or serious bodily injury to three or more people. The \$25,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Donation Assurance - We will reimburse the insured for failed donations as a result of the bankruptcy or reorganization of the donor organization or unemployment or incapacitation of a natural person. The organization can not have declared bankruptcy previously and there can be no evidence or knowledge by the donor of a pending failure or

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bankruptcy. The \$25,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Emergency Real Estate Consulting Fee - We will reimburse the insured for reasonable realtor's fees or real estate consultant's fees necessitated by the insured's need to relocate due to the unforeseeable destruction, due to a certified act of terrorism, fire, crash or collapse, at of the insured's principal location listed on the Declarations page. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Identity Theft Expense - We will reimburse any present director or officer of the named insured for reasonable identity theft expenses incurred as the direct result of any identity theft first discovered and reported during the policy period. The \$25,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Image Restoration and Counseling - We will reimburse the insured for reasonable expenses incurred for image restoration, recruitment of a replacement officer, and counseling of an innocent accused person arising out of improper acts such as sexual abuse/intimacy/molestation/assault committed by an insured against any natural person who is not an insured. The \$25,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Key Individual Replacement Expenses - We will pay reasonable expenses such as costs of advertising the employment position opening, travel, lodging, meal expenses etc., if the chief executive officer or executive director suffers any injury during the policy period which results in their loss of life. The amount paid is limited to 10 times the policy premium or the \$50,000 limit on the schedule, whichever is less. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Kidnap Expense - We will pay on behalf of any officer or director of the insured, reasonable fees incurred as a result of the kidnapping of them or their spouse, domestic partner, parent or child. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Temporary Meeting Space Reimbursement - We will reimburse the insured for reasonable rental of meeting space which is necessitated by the temporary unavailability of the insured's primary office space due to the failure of a climate control system, or leakage of a hot water heater. Coverage applies for the renting of temporary meeting space required for meetings with parties who are not insured under our policy. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies.

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- Terrorism Travel Reimbursement - We will reimburse any present director or officer of the named insured, reasonable emergency travel expenses resulting from a certified act of terrorism. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies.

- Theft Of Work Materials From Personal Areas - We will reimburse any insured 50% of their personal or business property policy's deductible for any theft involving work materials that are stolen from the insured's residence or automobile owned or rented by any individual insured, provided that the theft is covered by other insurance. The \$2,500 limit listed on the schedule is the annual aggregate. No deductible applies.

- Workplace Violence Counseling - We will reimburse the insured for reasonable expenses incurred for emotional counseling of the insured's employees in the event of an incidence of workplace violence that results in bodily injury or death of a member of the insured or any other person, which occurs at any of the insured premises. The \$50,000 limit listed on the schedule is the annual aggregate. No deductible applies.

## Company and Contact

### Filing Contact Information

Wilfredo Mejia, Regulatory Compliance Specialist	wmejia@markelcorp.com
4600 Cox Road	(800) 431-1270 [Phone]
Glen Allen, VA 23060	(804) 527-7900[FAX]

### Filing Company Information

Markel American Insurance Company	CoCode: 28932	State of Domicile: Virginia
4600 Cox Road	Group Code: 785	Company Type: Commercial Property & Casualty
Glen Allen, VA 23060	Group Name:	State ID Number:
(800) 431-1270 ext. [Phone]	FEIN Number: 54-1398877	
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Markel Insurance Company	CoCode: 38970	State of Domicile: Illinois
4600 Cox Road	Group Code: 785	Company Type: Commercial Property & Casualty
Glen Allen, VA 23060	Group Name:	State ID Number:

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(800) 431-1270 ext. [Phone]

FEIN Number: 36-3101262

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## Filing Fees

Fee Required? No  
Retaliatory? No  
Fee Explanation:  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Markel American Insurance Company	\$0.00	10/15/2008	
Markel Insurance Company	\$50.00	10/15/2008	23199340

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	10/16/2008	10/16/2008

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## Disposition

Disposition Date: 10/16/2008  
Effective Date (New): 01/01/2009  
Effective Date (Renewal): 01/01/2009  
Status: Approved  
Comment:

Rate data does NOT apply to filing.

### Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Form	THE MONUMENTENDORSEMENT	Approved	Yes

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## Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	THE MONUMENTEN DORSEMENT	MIL 160	(07/08)	Endorseme New nt/Amendm ent/Condi tions		0.00	MIL16008.pdf

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **THE MONUMENT ENDORSEMENT**

Unless otherwise stated herein, the terms, conditions, exclusions and other limitations set forth in this endorsement are solely applicable to coverage afforded by this endorsement, and the policy is amended as follows:

Solely for the purpose of this endorsement: 1) The words "you" and "your" refer to the Named Insured shown in the Declarations, and any other person or organization qualifying as a Named Insured under this policy. 2) The words "we", "us" and "our" refer to the company providing this insurance.

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM  
COMMERCIAL PROPERTY COVERAGE FORM  
CAPITAL ASSETS COVERAGE FORM  
GARAGE COVERAGE FORM  
FARM PROPERTY COVERAGE FORM  
FARM LIABILITY COVERAGE FORM

### **I. SCHEDULE OF ADDITIONAL COVERAGES AND LIMITS**

The following is a summary of Limits of Insurance or Liability and/or additional coverages provided by this endorsement. This endorsement is subject to the provisions of the policy to which it is attached.

Business Travel Accidental Death Benefit	\$50,000
Crisis Management	\$25,000
Donation Assurance	\$25,000
Emergency Real Estate Consulting Fee	\$50,000
Identity Theft Expense	\$25,000
Image Restoration and Counseling	\$25,000
Key Individual Replacement Expense	\$50,000
Kidnap Expenses	\$50,000
Temporary Meeting Space Reimbursement	\$50,000
Terrorism Travel Reimbursement	\$50,000
Theft of Work Materials from Personal Areas	\$ 2,500
Workplace Violence Counseling	\$50,000

### **II. CONDITIONS**

#### **A. Applicability of Coverage**

Coverage provided by your policy and any endorsements attached thereto is amended by this endorsement where applicable. All other terms and conditions of this policy or coverage part to which this endorsement is attached remain unchanged.

## **B. Limits of Liability or Limits of Insurance**

1. When coverage is provided by this endorsement and another coverage form or endorsement attached to this policy, the greater limit of Limits of Liability or Limits of Insurance will apply. In no instance will multiple limits apply to coverages which may be duplicated within this policy.

Additionally, if this policy and any other coverage part or policy issued to you by us, or any company affiliated with us, apply to the same occurrence, offense, wrongful act, accident or loss, the maximum Limits of Liability or Limit of Insurance under all such coverage parts or policies combined shall not exceed the highest applicable Limits of Liability or Limit of Insurance under any one coverage part or policy.

2. Limits of Liability or Limits of Insurance identified in Clause 1. above are not excess of, but are in addition to the applicable Limits of Insurance stated in the Declarations.

## **C. Claim Expenses**

Coverages provided herein are not applicable to the generation of claim adjustment costs by you; such as fees you may incur by retaining a public adjuster or appraiser.

## **III. ADDITIONAL COVERAGES**

### **A. Business Travel Accidental Death Benefit**

We will pay a Business Travel Accidental Death Benefit to the Named Insured if a Director or Officer suffers an "injury" while traveling on a common carrier for business purposes during the policy period which results in loss of life not later than 180 days after the policy period expiration, the date of cancellation or the date of non-renewal. The Accidental Death Benefit amount shown in the Schedule is the most that we will pay per occurrence. The limit shown in the Schedule will be the most we will pay per policy year. No deductible applies to this coverage. The "injury" must be reported to "us" during the policy period.

The Business Travel Accidental Death Benefit shall not be payable if the cause of the "injury" that resulted in loss of life was:

1. an intentional act by the insured;
2. an act of suicide or attempted suicide, whether or not the deceased was sane or insane at the time of the attempted suicide;

3. an act of war;
4. a disease process.

### **B. Crisis Management Emergency Response Expenses**

1. We will reimburse you for reasonable "crisis management emergency response expenses" incurred because of an "incident" giving rise to a "crisis" to which this insurance applies. The amount of such reimbursement is limited as described in Section II, B-Limits of Liability or Limits of Insurance. No other obligation or liability to pay sums or perform acts or services is covered.
2. We will reimburse only those reasonable "crisis management emergency response expenses" which are incurred during the policy period as shown in the Declarations of the policy to which this coverage is attached and reported to us within six months of the date the "crisis" was initiated.

The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

### **C. Donation Assurance**

We will reimburse you for reasonable "failed donation claim(s)". The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

With respect to any "failed donation claim", it is further agreed as follows:

1. the donor must never have been in bankruptcy, nor have filed for bankruptcy/reorganization prior to the time said pledge was made to you;
2. for non-cash donations, payment by us of a "failed donation claim" shall be based on the fair market value of said non-cash donation at the time of the "failed donation claim";
3. in the case of unemployment/incapacitation of a natural person donor and as a condition of payment of the "failed donation claim";
  - (a) neither the natural person donor nor you shall have had reason to believe the donor would become unemployed or incapacitated subsequent to the donation date and;

(b) the donor shall be unemployed for at least 60 days prior to us making payment;

4. no coverage shall be afforded for a written pledge of funds or other measurable tangible property to you dated prior to the policy period;

5. a donation amount which is to be collected by you over more than a 12 month period shall be deemed a single donation.

#### **D. Emergency Real Estate Consulting Fee**

We will reimburse you any reasonable realtor's fee or real estate consultant's fee necessitated by your need to relocate due to the "unforeseeable destruction" of your principal location listed on the Declarations page during the policy period. The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

#### **E. Identity Theft Expense**

We will reimburse any present Director or Officer of the Named Insured for reasonable "identity theft expenses" incurred as the direct result of any "identity theft" first discovered and reported during the policy period; provided that it began to occur subsequent to the effective date of your first policy with us. The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

#### **F. Image Restoration and Counseling**

We will reimburse to you expenses incurred for reasonable image restoration and counseling arising out of "improper acts" by any natural person Insured up to the limit shown in the Schedule per policy period for all Insureds combined. Covered expenses are limited to:

1. the costs of rehabilitation and counseling for the accused natural person Insured provided the natural person Insured is not ultimately found guilty of criminal conduct; said reimbursement to occur after acquittal of the natural person Insured;
2. the costs, charged by a recruiter or expended on advertising, of replacing an Officer as a result of "improper acts"; and

3. the costs of restoring the Named Insured's reputation and consumer confidence through image consulting.

No deductible applies to this coverage.

#### **G. Key Individual Replacement Expenses**

We will pay reasonable "key individual replacement expenses" if the Chief Executive Officer or Executive Director suffers an "injury" during the policy period which results in the loss of life during the policy period. The "key individual replacement expenses" amount shall be the lesser of the limit shown in the Schedule or ten (10) times the annual premium paid for this policy. The limit shown in the Schedule will be the most we will pay per policy period. No deductible applies to this coverage.

#### **H. Kidnap Expense**

We will pay on behalf of any Officer or Director of the Named Insured, reasonable fees incurred as a result of the kidnapping of them or their spouse, "domestic partner", parent or child during the policy period, subject to the limit shown in the Schedule each policy period. No deductible applies to this coverage. Coverage will not apply to any kidnapping by or at the direction of any present or former family member of the victim.

Reasonable fees will include:

1. fees and expenses of an independent negotiator or consultant retained with our prior approval;
2. interest on any loan taken by you to pay damages covered under this policy provided; however, that we shall not be liable for any interest accruing prior to thirty (30) days preceding the date of such payment, nor subsequent to the date of reimbursement from us for any portion of damages recoverable under this policy;
3. costs of travel and accommodations incurred by you which become necessary due to the applicable kidnapping;
4. the reward paid by you, which is pre-approved by us, to an informant for information not otherwise available which leads to the arrest and conviction of persons responsible for any damages under this policy; and

5. current salary to an Officer or Director of the Named Insured who is kidnapped provided; however, that the employee shall be held for more than thirty (30) days. Salary shall be paid for a period commencing upon abduction and ceasing upon the earliest of either the release of the employee or discovery of the death of the employee, or 120 days after we receive the last credible evidence that the employee is still alive, or twelve (12) months after the date of kidnapping, or the exhaustion of the kidnap expense limit, whichever comes first.

**I. Temporary Meeting Space Reimbursement**

We will reimburse you for reasonable rental of meeting space which is necessitated by the temporary unavailability of your primary office space due to the failure of a climate control system, or leakage of a hot water heater during the policy period. Coverage will exist only for the renting of temporary meeting space required for meeting with parties who are not insured under this policy. The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

**J. Terrorism Travel Reimbursement**

We will reimburse any present Director or Officer of the Named Insured in the event of a "Certified Act of Terrorism" during the policy period which necessitates that he/she incurs reasonable "emergency travel expenses". The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

**K. Theft of Work Materials from Personal Areas**

We will reimburse any insured 50% of their personal or business property policy's deductible for any theft involving "work materials" that are stolen from the "insured's personal area" during the policy period, provided that that the theft is covered by other insurance. No reimbursement is applicable under this coverage for thefts for which no other insurance policy provides a settlement. The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

**L. Workplace Violence Counseling**

In the event that an incidence of "workplace violence" occurs at any of your premises during the policy period, we will reimburse you for reasonable expenses incurred for the emotional counseling of your employees, during the policy period. The limit shown in the Schedule for this coverage will be the most we will reimburse per policy period for all Insureds combined. No deductible applies to this coverage.

**IV. Definitions**

**A.** "Certified Act of Terrorism", whenever used in this endorsement, means an act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State and the Attorney General of the United States, to be an act of terrorism pursuant to the federal Terrorism Risk Insurance Act. The criteria contained in the Terrorism Risk Insurance Act for a "certified act of terrorism" include the following:

1. The act resulted in insured losses in excess of \$5 million in the aggregate, attributable to all types of insurance subject to the Terrorism Risk Insurance Act; and
2. The act is a violent act or an act that is dangerous to human life, property or infrastructure and is 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.

**B.** "Crisis" means the public announcement that an "incident" occurred on your premises or at an event sponsored by you.

**C.** "Crisis management emergency response expenses" mean those expenses incurred for services provided by a "crisis management firm". However, "crisis management emergency response expenses" shall not include compensation, fees, benefits, overhead, charges or expenses of any insured or any of your employees, nor shall "crisis management emergency response expenses" include any expenses that are payable on your behalf or reimbursable to you under any other valid and collectible insurance.

- D.** "Crisis management firm" means any service provider you hire that is acceptable to us. Our consent will not be unreasonably withheld.
- E.** "Domestic Partner", whenever used in this endorsement, means any person who qualifies as a domestic partner under the provisions of any federal, state or local statute or regulation, or under the terms and provisions of any employee benefit or other program established by you.
- F.** "Emergency travel expenses", whenever used in this endorsement, will mean:
1. hotel expenses incurred which directly result from the cancellation of a scheduled transport, by train or air, by a commercial transportation carrier resulting directly from and within forty-eight hours of a "Certified Act of Terrorism"; and
  2. the increased amount incurred in air or train fare which may result from re-scheduling comparable transport, to replace a similarly scheduled transport canceled by a commercial transportation carrier in direct response to a "Certified Act of Terrorism".
- G.** "Failed donation claim", whenever used in this endorsement, will mean written notice to you during the Policy Period of:
1. the bankruptcy or reorganization of any donor whereby such bankruptcy or reorganization prevents the donor from honoring a prior written pledge of funds or other measurable tangible property to you;
  2. the unemployment or incapacitation of a natural person donor preventing him/her from honoring a prior written pledge of funds or other measurable tangible property to the Insured.
- H.** "Identity Theft ", whenever used in this endorsement, means the act of knowingly transferring or using, without lawful authority, a means of identification of any Officer or Director (or spouse thereof) of the Named Insured with the intent to commit, or to aid or abet another to commit, any unlawful activity that constitutes a violation of federal law or a felony under any applicable state or local law.
- I.** "Identity Theft Expenses", whenever used in this endorsement, means:
1. costs for notarizing affidavits or similar documents attesting to fraud required by financial institutions or similar credit grantors or credit agencies;
  2. costs for certified mail to law enforcement agencies, credit agencies, financial institutions or similar credit grantors;
  3. loan application fees for re-applying for a loan or loans when the original application is rejected solely because the lender received incorrect credit information.
- J.** "Improper acts", whenever used in this endorsement, means any actual or alleged act of:
1. sexual abuse;
  2. sexual intimacy;
  3. sexual molestation; and/or
  4. sexual assault;
- committed by an Insured against any natural person who is not an Insured. Such "improper acts" must have been committed by the Insured while in his or her capacity as an insured.
- K.** "Incident" means an accident or other event resulting in death or serious bodily injury to three or more persons. "Incident" shall also mean the accidental discharge of pollutants.
- L.** "Injury", whenever used in this endorsement, means any physical damage to the body caused by violence, fracture or an accident that results in physical damage or hurt.
- M.** "Insured's personal area" means any residence or automobile owned or rented by any insured.
- N.** "Key individual replacement expenses", whenever used in this endorsement, means the following necessary expenses:
1. costs of advertising the employment position opening;
  2. travel, lodging, meal and entertainment expenses incurred in interviewing job applicants for the employment position opening; and
  3. miscellaneous extra expenses incurred in finding, interviewing and negotiating with the job applicants, including, but not limited to, overtime pay, costs to verify the background and references of the applicants and legal expenses incurred to draw up employment contracts.

- O.** "Serious bodily injury" means any injury to a person that creates a substantial risk of death, serious permanent disfigurement, or protracted loss or impairment of the function of any bodily member or organ.
- P.** "Unforeseeable Destruction", whenever used in this endorsement, means damage resulting from a "Certified Act of Terrorism", fire, crash or collapse which renders all of your primary office completely unusable.
- Q.** "Work materials" means any equipment that is used by the insured solely in the course of the insured's business; inclusive of stores of data and client records.
- R.** "Workplace violence", whenever used in this endorsement, means any intentional use of or threat to use deadly force by any natural person, with intent to cause harm and that results in bodily "injury" or death of a member of the Insured or any other natural person while on your premises.

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## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-  
Property & Casualty

**Review Status:** Approved 10/16/2008

**Comments:**

**Attachment:**

Form PCTD.pdf

## Property & Casualty Transmittal Document (Revised 1/1/06)

**1. Reserved for Insurance Dept. Use Only**

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**2. Insurance Department Use only**

a. Date the filing is received:	
b. Analyst:	
c. Disposition:	
d. Date of disposition of the filing:	
e. Effective date of filing:	
New Business	
Renewal Business	
f. State Filing #:	
g. SERFF Filing #:	
h. Subject Codes	

<b>3. Group Name</b>	<b>Group NAIC #</b>
Markel Corporation	785

4. Company Name(s)	Domicile	NAIC #	FEIN #
Markel Insurance Company	Illinois	38970	36-3101262
Markel American Insurance Company	Virginia	28932	54-1398877

<b>5. Company Tracking Number</b>	<b>0810FF065-IL</b>
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**Contact Info of Filer(s) or Corporate Officer(s)** [include toll-free number]

6.	Name and address	Title	Telephone #s	Fax #	e-mail
	Deidre Balbuena 4600 Cox Road Glen Allen VA 23060	VP-Product & Regulatory Services	1-800-431- 1270 ext. 7941	1-804-527- 7900	wmejia@markelcorp.com
7.	Signature of authorized filer		<i>Deidre Balbuena</i>		
8.	Please print name of authorized filer		Deidre Balbuena VP-Product & Regulatory Services		

**Filing information** (see General Instructions for descriptions of these fields)

9.	Type of Insurance (TOI)	Commercial Interline
10.	Sub-Type of Insurance (Sub-TOI)	Commercial Interline
11.	State Specific Product code(s)(if applicable)[See State Specific Requirements]	
12.	Company Program Title (Marketing title)	
13.	Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14.	Effective Date(s) Requested	New: 1/1/09      Renewal: 1/1/09
15.	Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16.	Reference Organization (if applicable)	N/A
17.	Reference Organization # & Title	N/A
18.	Company's Date of Filing	10/15/08
19.	Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

## Property & Casualty Transmittal Document---

<b>20.</b>	<b>This filing transmittal is part of Company Tracking #</b>	0810FF065-IL
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<b>21.</b>	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Markel Insurance Company and Markel American Insurance Company wish to file for your review a new endorsement MIL 160 - The Monument Endorsement to be utilized to provide enhanced coverages which may attach to our General Liability, Commercial Property, Capital Assets, Garage or Package policies.

The rate and rules to be used in conjunction with this new endorsement have been desk-filed under separate cover, our company file # 0810RR065-IL.

<b>22.</b>	<b>Filing Fees</b> (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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<b>Check #:</b>	N/A- EFT
<b>Amount:</b>	\$50.00

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**Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.**

**\*\*\*Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**