

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

## **MEDICAL EXPENSES – EXCLUSION**

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

### **SCHEDULE**

<b>Description And Location Of Premises Or Classification:</b>
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

With respect to any premises or classification shown in the Schedule, **Section II – Liability** is modified as follows:

**A.** Paragraph **A.2. Medical Expenses** does not apply and none of the references to Paragraph **A.2.** in **Section II – Liability** apply.

**B.** The following is added to Paragraph **A.1.f.(1) Coverage Extension – Supplementary Payments:**

**(h)** Expenses incurred by the insured for first aid administered to others at the time of an accident for "bodily injury" to which this insurance applies.