

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

**PROVIDE REQUIRED 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
- GOVERNMENT EMPLOYEE THEFT AND FORGERY POLICY

**SCHEDULE**

Entity	Number Of Days
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

If this insurance is cancelled, whether at your request or ours, we will provide the entity shown in the Schedule with written notice of such cancellation. No cancellation of this insurance shall take effect until the entity shown in the Schedule has received such written notice, and then only after the number of days shown in the Schedule, unless an earlier date is approved by such entity.