



Cookie Booth Authorization

Dates: Friday, Feb. 7-Sunday, March 8, 2020

Entered:
Scanned:
eBudde Ready:
Website Ready:

Girl Scout volunteer information:

Service unit name: Park Hills 610

Phone: 619-990-3128

Volunteer name: Teresa Fong

Email: teresa.fong4@gmail.com

Store contact information:

Manager/business owner's name: _____

Store name: Vons

Phone: _____

Address: 4145 30th Street

Email: _____

City/Zip code: San Diego, CA 92104

Cookie Booth Shifts:

All days and times approved (Feb. 7-March 8; 8 a.m.-8 p.m.)

-Or- choose approved days and times:

Approved days:

- Monday Friday
 Tuesday Saturday
 Wednesday Sunday
 Thursday

Approved shifts:

- Afternoons only
 Mornings only
 All Day

2hr shifts

- 8-10 a.m. 9-11 a.m.
 10-Noon 11-1 p.m.
 Noon-2 p.m. 1-3 p.m.
 2-4 p.m. 3-5 p.m.
 4-6 p.m. 5-7 p.m.
 6-8 p.m.

3hr shifts

- 8-11 a.m.
 11-2 p.m.
 2-5 p.m.
 5-8 p.m.

Other shifts not listed: _____

I confirm that the location is open during these times.

Property management:

Does Property Management company need to provide additional approval? No Yes

Company: _____

Contact: _____ Phone/email: _____

Insurance:

Girl Scouts San Diego will issue a certificate of liability insurance for your location. Please indicate necessary verbiage, if any:

Special requests:

Girl Scouts will be the only soliciting organization during these times: No Yes

Are there any known security concerns? Please specify: _____

Set-up instructions, check all that apply:

- Outside only Inside okay Ask manager for set-up instructions One door only Both doors okay Pop-ups okay

Manager/owner's signature: _____

Date: 9-2-19

Return this form to:

Girl Scouts San Diego, Attn: Product Program
Address: 1231 Upas Street, San Diego, CA 92103
Fax: 619-481-3504 Phone: 619-610-0825 Email: cookies@sdgirlscouts.org

Council-white copy
Service unit-yellow copy
Business-pink copy
MG:mg PSC-062 7/19/2019

*older girl site; small table due to space!



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/01/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).


| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| PRODUCER Marsh & McLennan Agency LLC Marsh & McLennan Ins. Agency LLC PO Box 85638 San Diego, CA 92186 | CONTACT NAME: Dawn Walter PHONE (A/C, No, Ext): 858 587-7540 FAX (A/C, No): 858 909-9707 E-MAIL ADDRESS: dawn.walter@marshmma.com | |
| | INSURER(S) AFFORDING COVERAGE NAIC # INSURER A : National Casualty Company 11991 | |
| INSURED Girl Scouts San Diego Imperial Council, Inc. 1231 Upas Street San Diego, CA 92103 | INSURER B : | |
| | INSURER C : | |
| | INSURER D : | |
| | INSURER E : | |
| | INSURER F : | |
| | | |

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|---------------|-------------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | KKI23868800 | 01/01/2020 | 01/01/2021 | EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS - COMP/OP AGG \$5,000,000 \$ |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | KKI23868900 | 01/01/2020 | 01/01/2021 | COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED RETENTION \$ <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE | | | XKO23869000 | 01/01/2020 | 01/01/2021 | EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$ PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | N/A | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Sale of Girl Scout Cookies 2/07/20 - 3/08/20.

| | |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CERTIFICATE HOLDER Vons - 4145 30th St 4145 30th Street San Diego, CA 92104-0000 | CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| | AUTHORIZED REPRESENTATIVE  |

INSURED: Girl Scouts San Diego Imperial Council,

POLICY #: KKI23868800

POLICY PERIOD: 01/01/2020

TO 01/01/2021

Scottsdale Indemnity Company

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCOUT COUNCIL— COMMERCIAL GENERAL LIABILITY BROADENING ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

The following is a summary of the Limits of Insurance and coverage provided by this endorsement. These coverages apply separately to each of your premises described in the Declarations.

If you purchase additional limits for any of these coverages at a specified location, the limits shown below will apply in excess of the insurance purchased separately. We will not pay more under this endorsement than the Limits of Insurance shown below under the Summary of Additional Coverages or Summary of Coverage Amendments and Extensions.

Summary of Additional Coverage

| LIMITS OF INSURANCE | SUBJECTS OF INSURANCE |
|----------------------------|-----------------------------------------|
| \$1,000,000 per occurrence | Damage to Premises Rented to You |
| \$ 25,000 | Emergency Real Estate Consultant Fee |
| \$ 25,000 | Identity Theft Expenses |
| \$ 50,000 | Key Individual Replacement Cost |
| \$ 2,500 | Lease Cancellation Moving Expense |
| \$ 2,500 | Supplementary Payments—Bail Bonds |
| \$500 per day | Supplementary Payments—Loss of Earnings |
| \$ 25,000 | Temporary Meeting Space |
| \$ 25,000 | Terrorism Travel Reimbursement |
| \$ 25,000 | Workplace Violence Counseling |

Summary of Coverage Amendments and Extensions

| SUBJECTS OF INSURANCE |
|---------------------------------------------------------------------------------------------------------|
| Aircraft Chartered With Pilot |
| Definition of "Bodily Injury" and "Personal and Advertising Injury" Redefined |
| Excess Medical Payments—Athletic Activities Participants-Sponsored Activities |
| Expected or Intended Injury—"Property Damage" exception |
| Non-Owned Watercraft Less Than Seventy-Five (75) Feet In Length |
| Primary and Non-Contributory Insurance—Additional Insureds Required by Written Contract |
| Property Damage to Property of Others—Girls Scout Sponsored Activities |
| Unintentional Errors and Omissions |
| Waiver of Right of Recovery When Required By Contract |
| Who Is An Insured to Include Any Person or Organization When Required By Written Contract Prior to Loss |

I. Coverage Amendments

A. Paragraph 2.a. Exclusions of SECTION I—COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY is replaced by:

a. Expected or Intended Injury

"Bodily injury" or "property damage" expected or intended from the standpoint of the insured. This exclusion does not apply to "bodily injury" or "property damage" resulting from the use of reasonable force to protect persons or property.

B. Paragraph 2.g.(2) Exclusions of SECTION I—COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY is replaced by:

(2) A watercraft you do not own that is:

- (a)** Less than seventy-five (75) feet long; and
- (b)** Not being used to carry persons or property for a charge;

C. The following is added to paragraph 2.g. Exclusions of SECTION I—COVERAGES, COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY:

This exclusion does not apply to an aircraft that is:

- 1.** Chartered by, loaned to, or hired by you with a paid crew;

2. Not owned by any insured; and

3. Used to carry any person or property for a charge.

D. The following is added to Exclusion 2.j. Damage to Property of SECTION 1—COVERAGES, COVERAGE A BODILY INJURY AND PROPERTY DAMAGE LIABILITY:

Paragraphs **(4)** and **(6)** of this exclusion do not apply to "property damage" to property of others caused by "your work" in connection with scouting activities or operations sponsored by your Scout Council.

E. Paragraphs 2.b. and c. Exclusions of SECTION I—COVERAGES, COVERAGE B PERSONAL AND ADVERTISING INJURY LIABILITY are replaced by:

b. Material Published With Knowledge of Falsity

"Personal and advertising injury" arising out of publication of material, including, but not limited to, oral, written, televised, videotaped or electronically transmitted publication of material, if done at the direction of the insured with knowledge of its falsity;

c. Material Published Prior To Policy Period

"Personal and advertising injury" arising out of publication of material, including, but not limited to, oral, written, televised, videotaped or electronically transmitted publication of material,

whose first publication took place before the beginning of the policy period;

- F. With respect to Medical Payments—Athletic Activities—Excess Insurance For Participants in Activities Sponsored By You, the following amendments apply:

1. Paragraph 2.e., **Athletic Activities**, of **SECTION I, COVERAGE C MEDICAL PAYMENTS** is deleted.
2. The following is added to paragraph 4.b. **Excess Insurance** of **SECTION IV—COMMERCIAL GENERAL LIABILITY CONDITIONS**:

This insurance is excess over that part of any other insurance that provides coverage for medical payments that are incurred by any member of a scouting organization and its volunteers who are participants of a supervised and approved activity sponsored by your council.

- G. Paragraphs 1.b. and d. of **SUPPLEMENTARY PAYMENTS—COVERAGES A and B** section are replaced by:

- b. Up to \$2,500 for the cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.
- d. All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit," including actual loss of earnings up to \$500 a day because of time off from work.

- H. Paragraph 3.a. of **SECTION II—WHO IS AN INSURED** is replaced by:

- a. Coverage under this provision is afforded only until the one hundred eightieth (180th) day after you acquire or form the organization or the end of the policy period, whichever is earlier.

- I. The following is added to **SECTION II—WHO IS AN INSURED**:

Any person or organization to whom you are obligated by virtue of a valid written contract to provide insurance as is afforded by this policy, but only with respect to liability arising out of your activities or operations.

- J. The following is added to subparagraph a. **Primary Insurance** of paragraph 4. **Other Insurance** of **SECTION IV—COMMERCIAL GENERAL LIABILITY CONDITIONS**:

However, if you specifically agree in a written contract or written agreement that the insurance provided to an additional insured under this Coverage Part be afforded on a primary basis, or a primary and non-contributory basis, this insurance is primary to other insurance that is available to such additional insured for a loss we cover, provided that:

- a. The "bodily injury" or "property damage" for which coverage is sought occurs; or
- b. The "personal and advertising injury" for which coverage is sought arises out of an offense committed;

subsequent to the signing and execution of that contract or agreement by you.

- K. The following conditions are added to paragraph 2. **Duties In The Event Of Occurrence, Offense, Claim Or Suit** of **SECTION IV—COMMERCIAL GENERAL LIABILITY CONDITIONS**:

Knowledge of the "occurrence," offense, claim or "suit" by the agent, servant, or "employee" of an insured shall not in itself constitute your knowledge unless one of your officers, manager or partners has received notice of the "occurrence," offense, claim or "suit."

Failure by the agent, servant or "employee" of an insured (other than an officer, manager or partner) to notify us of an "occurrence" shall not constitute a failure to comply with Items a. and b. of this condition.

- L. The following are added to **SECTION IV—COMMERCIAL GENERAL LIABILITY CONDITIONS**:

Unintentional Error or Omission

Any unintentional error or omission in the description of or failure to completely describe, any premises or operations intended to be covered by this Coverage Part will not invalidate or affect coverage for those premises or operations. However, you must report such error or omission to us as soon as practicable after its discovery.

Waiver of Right of Recovery

We waive all rights of recovery when you have agreed to waive your rights of recovery when required by a written contract. However, this provision only applies if the written contract was executed prior to the date of the "occurrence."

M. Paragraphs 3. and 14. of SECTION V—DEFINITIONS are replaced as follows:

3. "Bodily Injury" means bodily injury, sickness or disease sustained by a person. This includes mental anguish, mental injury, shock, fright, humiliation, emotional distress or death resulting from bodily injury, sickness or disease.
14. "Personal and advertising injury" means injury, including consequential "bodily injury," arising out of one or more of the following offenses:
 - a. False arrest, detention or imprisonment;
 - b. Malicious prosecution or abuse of process;
 - c. The wrongful eviction from, wrongful entry into, or invasion of the right of private occupancy of a room, dwelling or premises that a person occupies, committed by or on behalf of its owner, landlord or lessor;
 - d. Any publication of material including, but not limited to oral, written, televised, videotaped or electronically transmitted publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services;
 - e. Any publication of material, including but not limited to oral, written, televised, videotaped or electronically transmitted publication of material that violates a person's right of privacy;
 - f. The use of another's advertising idea in your "advertisement"; or
 - g. Infringing upon another's copyright, trade dress or slogan in your "advertisement."

N. Broadened Coverage—Damage to Premises Rented to You

1. The word **fire** is replaced with the phrase **fire, lightning, explosion, smoke and leaks from sprinklers** where it appears in:
 - a. **SECTION I, Coverage A, 2. Exclusions, j. Damage to Property;**

- b. **SECTION I, Coverage A, 2. Exclusions, last paragraph;**
- c. **SECTION III, Limits of Insurance, Item 6.;** and
- d. **SECTION IV, Conditions, 4. Other Insurance, Item b.(1)(a)(ii).**

2. The limit of Insurance applicable to Damage to Premises Rented to You is \$1,000,000 unless a higher limit is specified on the Declarations.

II. Additional Coverages:

A. The following are added to the **SUPPLEMENTARY PAYMENTS—COVERAGES A AND B** section:

We will pay, in addition to our Limits of Insurance:

Emergency Real Estate Consultant Fee (\$25,000 Aggregate)

We will reimburse you up to \$25,000 in any one policy year for any realtor's fee or real estate consultant's fee required by the Named Insured's need to relocate due to the imminent danger of loss of life or harm to occupants of the Named Insured's premises scheduled on the Declarations.

Identity Theft Expense

1. Coverage

We will pay for reimbursement of any present director or officer of the Named Insured for "identity theft expenses" incurred as the direct result of any "identity theft" occurring, discovered and reported during the policy period.

2. Limit of Insurance

We will pay up to \$25,000 as a Limit of Insurance.

3. "Identity theft" means the act of knowingly transferring or using, without lawful authorization, the identity of any officer or director 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.

4. "Identity theft expenses" means:

- a. Costs of notarizing documents required by financial institution or similar creditors as testaments to fraud.

- b. Costs for certified mail to law enforcement agencies, credit agencies, financial institutions or similar creditors.
- c. Loan application fees for re-applying for loan(s) when the original application is rejected solely because of incorrect credit information.

Key Individual Replacement Expenses

We will reimburse you up to \$50,000 as a Limit of Insurance per policy year for "key individual replacement expenses" for expenses incurred by the Named Insured to replace the Chief Executive Officer or Executive Director if that officer or director suffers an injury during the policy period which results in the loss of life during the policy period.

"Key Individual Replacement Expenses" means:

- 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.

Lease Cancellation Moving Expenses

We will reimburse the Named Insured up to \$2,500 for moving expenses incurred when moving is made necessary by the cancellation of a lease at premises occupied by the Named Insured and described in the Declarations.

Temporary Meeting Space

We will reimburse you up to \$25,000 as a Limit of Insurance in any one policy year under this for expenses incurred due to the temporary unavailability of the Named Insured's primary office space due to the failure of a climate control system, or leakage of a hot water heater during the policy period. Expenses will be reimbursed only for the rental of temporary meeting space required for meeting with parties who are not insured under this Policy.

Terrorism Travel Reimbursement

We will reimburse you up to \$25,000 as a Limit of Insurance in any one policy year for "emergency travel expenses" incurred by a director or officer of the Named Insured due to the occurrence of a "certified act of terrorism."

"Emergency travel expenses" are additional travel expenses incurred to re-schedule comparable transport due to the cancellation of scheduled transport within forty-eight (48) hours of a "Certified Act of Terrorism."

"Certified act of terrorism" 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 that Act for a "certified act of terrorism" include the following:

- 1. The act resulted in aggregate losses in excess of \$5 million; 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.

Workplace Violence Counseling

We will reimburse you up to \$25,000 as a Limit of Insurance in any one policy year for expenses you incur for counseling "employees" of the Named Insured when that counseling is necessary due to an incident of "workplace violence."

"Workplace violence" means the intentional use of, or threat to use deadly force by any person with the intent to cause harm and that results in bodily injury or death of a person while on the Named Insured's premises.