

October 18, 2011

Ms. Linda Odenbeck Girl Scouts of Western Ohio 4930 Cornell Road Cincinnati, OH 45242-1804

RE: Audit Form - 2011 Property Casualty Insurance

Dear Linda:

Enclosed please find the completed Audit Form for the period ending 12-31-2011.

Thank you for your assistance Linda. Please give me a call if you need additional information or if I can be of further assistance.

Sincerely,

Jeff Erager, CPCU Maguire Agency BKD AWP735 2-06

Summary of insurance Coverage as of 12/31/11 (Period End)

CLIENT: Girl Scouts of Western Ohio DATE: 12/31/11

Insurable Risk	Name of Carrier	Period of Coverage	Limit of Coverage (Indicate "NI" if risk is not insured)	Deductible	Any Claims in Excess of Insured Amounts?	Describe any major change in coverage during the year
General liability	Travelers	1/1/11-12	\$1,000,000/\$5,000,000	None	No	
Product liability/malpractice	Travelers	1/1/11-12	\$1,000,000/\$2,000,000	None	No	
Automobile liability	Travelers	1/1/11-12	\$1,000,000	None	No	
Errors and omissions	1					
Worker compensation	Travelers	1/1/11-12	\$500,000/\$500,000	None	No	
Fidelity (employee dishonesty)	Travelers	1/1/11-12	\$500,000	\$2,500	No	
Employee kealth		}				
Fiduciary liability						
Other Internet Liab	Chubb	1/1/11-12	\$500,000	\$2,500	No	
Excess Liab	Travelers	1/1/11-12	\$15,000,000	None /11	No	
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