



**Huskie Wheels of Support
Memorandum of Understanding**

RESPONSIBILITIES OF THE ATHLETICS DEPARTMENT

1. Ensure terms of the agreement along with any special instructions.
2. Supply dealer benefits associated with the Huskie Wheels of Support program.
3. Provide dealer with regular communication regarding the mileage of the vehicles.
4. Maintain commercial automobile insurance to cover vehicles and approved drivers within the Huskie Wheels of Support program (See Attachment A.)

RESPONSIBILITIES OF ASSIGNED COACH OR ADMINISTRATIVE STAFF MEMBER

1. Keep car clean and neat at all times.
2. Never use the spare tire unless in emergency.
3. Car is to be serviced regularly to manufacturer's specifications and at the dealer's service department if at all possible.
4. Car is to be returned promptly to the dealer at agreed time, mileage allowance, or upon separation of service from the University.
5. Responsible for all repairs required, not covered by the manufacturer's warranty, including deductible portions of insurance if involved in chargeable accident.
6. Responsible for any and all traffic and/or parking violations.
7. Return car in good, resale condition.
8. Responsible for insurance coverage as agreed to with dealer, as applicable.
9. Responsible for licensing fee as agreed to with dealer, if applicable.
10. All automobile accidents must be reported by the coach or administrative staff member to the car dealer, the Department of Intercollegiate Athletics' Development Office, and the University Risk Management Office immediately following accidents.
11. Immediately notify the Wheels of Support Administrator if the car is exchanged for a different car. (Insurance must be transferred to new car)

RESPONSIBILITY OF THE CAR DEALER

1. To provide the assigned athletic coach or staff member with an automobile of the dealer's choice suitable for recruiting, scouting, and staff business.
2. To replace the car in service at the dealer's request.
3. To assist the assigned athletic coach or staff member with the service and maintenance of the car with the least amount of expense and cost to both parties and to provide transportation in case of emergency repairs.

This Memorandum Of Understanding signed and agreed on this 2 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 2 cars (\$15,000 Value).

 Brian Bemis
 Brian Bemis Automotive Group LTD.
 1875 DeKalb Avenue
 Sycamore, IL 60178

 Jeff Compher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



**Huskie Wheels of Support
Memorandum of Understanding**

RESPONSIBILITIES OF THE ATHLETICS DEPARTMENT

1. Ensure terms of the agreement along with any special instructions.
2. Supply dealer benefits associated with the Huskie Wheels of Support program, including Four (4) Benchback Seats (PREME, Row 28, Seats 7 – 10)
3. Provide dealer with regular communication regarding the mileage of the vehicles.
4. Maintain commercial automobile insurance to cover vehicles and approved drivers within the Huskie Wheels of Support program (See Attachment A.)

RESPONSIBILITIES OF ASSIGNED COACH OR ADMINISTRATIVE STAFF MEMBER

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This Memorandum Of Understanding signed and agreed on this 2 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 1 car (\$ 7500 Value).

 Brian Collins
 Fox Valley Ford, Inc.
 208 Hansen Boulevard
 North Aurora, IL 60542

 Jeff Clapher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



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This Memorandum Of Understanding signed and agreed on this 2 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 2 cars (\$ 15,000 Value).

 George Nahas
 George Nahas Oldsmobile
 U.S. Highway 441
 Tavares, FL 32778

 Jeff Contigher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



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This Memorandum Of Understanding signed and agreed on this 2 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 1 car (\$ 7,500 Value).

 Deen Collins
 Gerald Nissan Subaru
 213 Hansen Boulevard
 North Aurora, IL 60542

 Jeff Compher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



**Huskie Wheels of Support
Memorandum of Understanding**

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This Memorandum Of Understanding signed and agreed on this 23 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 1 car (\$ 7500 Value).


 Mike Mooney
 Mike Mooney, Inc.
 204 North 4th Street
 DeKalb, IL 60115


 Jeff Compher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



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This Memorandum Of Understanding signed and agreed on this 2 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 1 car (\$ 7500 Value).

 Pete Harkness
 Pete Harkness Auto Group
 2811 N. Locust St.
 Sterling, IL 61081

 Jeff Compher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



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This Memorandum Of Understanding signed and agreed on this 2nd day of JULY, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 1 car (\$ 10,000.00 Value).



 Joe Peters
 Peters Automotive
 1080 S. 7th Street.
 Rochelle, IL 61068



 Jeff Compher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115



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This Memorandum Of Understanding signed and agreed on this 2 day of June, 2011. For fiscal year 2012 beginning July 1, 2011 ending June 30, 2012 for 1 car (\$ 7,500 Value).

 Terry Bryan
 Riverfront Chrysler Plymouth Jeep Eagle
 200 Hansen Boulevard
 North Aurora, IL 60542

 Jeff Compher
 Associate Vice-President/Director of Athletics
 Northern Illinois University
 1525 W. Lincoln Hwy.
 DeKalb, IL 60115

THE HARTFORD - PRODUCTION STATUS CENTER
HARTFORD PLAZA, NP-6-1
HARTFORD, CT 06115

83 DEC PD6990
THE HARTFORD
3600 WISEMAN BLVD.
SAN ANTONIO

TX 78251

06074

*2100083PD69900101



REGIONAL OFFICE INSTRUCTION SHEET

POLICY NO. 83 UEC PD6990

ROUTING INSTRUCTIONS:

SEND TO RECORDS. TRANSFER CORR IF APPLICABLE.

POLICY FACE SHEET

90
69 INSURER:
PD HARTFORD INSURANCE GROUP
UEC

POLICY NO.: 83 UEC PD6990 SA
COMMON POLICY DECLARATIONS

ITEM

1. NAMED INSURED AND MAILING ADDRESS: NORTHERN ILLINOIS UNIVERSITY
595 COLLEGE AVE.
DEKALB IL 60115
(DEKALB COUNTY)

2. POLICY PERIOD: FROM 07/01/11 TO 07/01/12

3. AGENT'S OR BROKER'S CODE: 552137 RECORDS RETENTION - PERMANENT
AGENT'S OR BROKER'S NAME: MARSH USA INC

PREVIOUS POLICY NO.: 83 UEC PD6990

4. AUDIT PERIOD: ANNUAL

5. NAMED INSURED IS: UNIVERSITY

6. DESCRIPTION OF YOUR BUSINESS: SCHOOLS - COLLEGES, UNIVERSITIES, JUNIOR

AUTO COMPANY CODE: 6
SELECT CUSTOMER

POLICY STATUS: ACTIVE
LOB LEVEL OF SUPPORT: AUTO-S
AUDIT: (4) AUTO

RATED RISK
SIC CODE - 8221

MARKET SEGMENTATION - 984

AUTOMATICALLY BOOKED

TRANS TYPE: RENL CNTL#: 001
FACE SHEET TERMINAL ID: R0FCV21A PAGE 1
07/19/11 83 UEC PD6990 SA (07/01/12)

06075
*2100083PD69900101



This SPECIAL MULTI-FLEX POLICY is provided by the stock insurance company(s) of The Hartford Insurance Group, shown below.

COMMON POLICY DECLARATIONS



POLICY NUMBER: 83 UEC PD6990 SA
RENEWAL OF: 83 UEC PD6990

Named Insured and Mailing Address:
(No., Street, Town, State, Zip Code)

NORTHERN ILLINOIS UNIVERSITY
595 COLLEGE AVE.
DEKALB , IL 60115
(DEKALB COUNTY)

Policy Period: From 07/01/11 To 07/01/12
12:01 A.M., Standard time at your mailing address shown above.

In return for the payment of the premium, and subject to all of the terms of this policy, we agree with you to provide insurance as stated in this policy. The Coverage Parts that are a part of this policy are listed below. The Advance Premium shown may be subject to adjustment.

Total Advance Premium: \$11,702.00

Coverage Part and Insurance Company Summary

Advance Premium

COMMERCIAL AUTO
HARTFORD UNDERWRITERS INSURANCE COMPANY
HARTFORD PLAZA
HARTFORD, CONNECTICUT 06115

\$11,702.00

Form Numbers of Coverage Parts, Forms and Endorsements that are a part of this policy and that are not listed in the Coverage Parts.

HM0001 IL00171198 IH99400409 IH99410409 IL00210908 HA00250204

Agent/Broker Name: MARSH USA INC

Countersigned by _____
(Where required by law) Authorized Representative Date

Form HM 00 10 01 07

06076

*2100083PD69900101





Named Insured: NORTHERN ILLINOIS UNIVERSITY

Policy Number: 83 UEC PD6990

Effective Date: 07/01/11

Expiration Date: 07/01/12

Company Name: MARSH USA INC

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

TRADE OR ECONOMIC SANCTIONS ENDORSEMENT

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims.

All other terms and conditions remain unchanged.

**COMMERCIAL AUTOMOBILE
COVERAGE PART - DECLARATIONS
BUSINESS AUTO COVERAGE FORM**



POLICY NUMBER: 83 UEC PD6990

This COMMERCIAL AUTOMOBILE COVERAGE PART consists of:

- A. This Declarations Form;
- B. Business Auto Coverage Form; and
- C. Any Endorsements issued to be a part of this Coverage Form and listed below.

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ITEM ONE - NAMED INSURED AND ADDRESS

The Named Insured is stated on the Common Policy Declarations.

ADVANCE PREMIUM: \$ 11,702.00

AUDIT PERIOD:



Except in this Declarations, when we use the word "Declarations" in this Coverage Part, we mean this "Declarations" or the "Common Policy Declarations."

Form Numbers of Coverage Forms, Endorsements and Schedules that are part of this Coverage Part:

HA00040302	HA00121102T	CA00011001	HA21020692	CA99030306
CA21301108	CA21381108	CA01200603	CA02700894	HA00241290
HA99081290	HA99160910	HA99260406		

**COMMERCIAL AUTOMOBILE
COVERAGE PART - DECLARATIONS
BUSINESS AUTO COVERAGE FORM (Continued)**

POLICY NUMBER: 83 UEC PD6990

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the advance premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos." "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTO Section of the Business Auto Coverage Form next to the name of the coverage.

Coverages	Covered Autos	Limit The Most We Will Pay for Any One Accident or Loss	Advance Premium
LIABILITY	07	\$ 1,000,000	\$ 6,214.00
PERSONAL INJURY PROTECTION (or equivalent No-Fault coverage)		Separately stated in each Personal Injury Protection Endorsement.	
ADDED PERSONAL INJURY PROTECTION (or equivalent added No-Fault coverage)		Separately stated in each Added Personal Injury Protection Endorsement.	
OPTIONAL BASIC ECONOMIC LOSS (New York only)		\$25,000 each eligible injured person.	
PROPERTY PROTECTION INSURANCE (Michigan only)		Separately stated in the Property Protection Insurance Endorsement.	
MEDICAL EXPENSE AND INCOME LOSS BENEFITS (Virginia only)		Separately stated in the Medical Expense and Income Loss Benefits Endorsement.	
AUTO MEDICAL PAYMENTS	07	\$ or the limit separately stated for each "auto" in ITEM THREE.	\$ 300.00
UNINSURED MOTORISTS	07	\$ SEE FORM HA2102 OR STATE FORM(S)	\$ 520.00
UNDERINSURED MOTORISTS (When not included in Uninsured Motorist Coverage)	07	\$ SEE FORM HA2102 OR STATE FORM(S)	\$ 780.00

COMMERCIAL AUTOMOBILE
COVERAGE PART - DECLARATIONS
BUSINESS AUTO COVERAGE FORM (Continued)

POLICY NUMBER: 83 UEC PD6990

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS (Continued)

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Coverages	Covered Autos	Limit The Most We Will Pay for Any One Accident or Loss	Advance Premium
PHYSICAL DAMAGE		See ITEM FOUR for hired or borrowed "autos".	
COMPREHENSIVE COVERAGE	07	Actual Cash Value, Cost of Repair, or the Stated Amount shown in ITEM THREE, whichever is smallest, minus any deductible shown in ITEM THREE for each covered "auto".	\$ 979.00
SPECIFIED CAUSES OF LOSS COVERAGE		Actual Cash Value, Cost of Repair, or the Stated Amount shown in ITEM THREE, whichever is smallest, minus \$ deductible for each covered "auto" for "loss" caused by mischief or vandalism.	
COLLISION COVERAGE	07	Actual Cash Value, Cost of Repair, or the Stated Amount shown in ITEM THREE, whichever is smallest, minus any deductible shown in ITEM THREE for each covered "auto".	\$ 2,909.00
TOWING AND LABOR		\$ or the amount separately stated for each "auto" in ITEM THREE, whichever is greater, for each disablement.	
Endorsement Premium (Not included above)			
TOTAL ADVANCE PREMIUM:			\$ 11,702.00

**COMMERCIAL AUTOMOBILE
COVERAGE PART - DECLARATIONS
BUSINESS AUTO COVERAGE FORM (Continued)**

POLICY NUMBER: 83 UEC PD6990

ITEM THREE - SCHEDULE OF COVERED AUTOS YOU OWN

Applicable only if "Schedule of Covered Autos You Own" is issued to form a part of this Coverage Form.
FORM HA0012 ATTACHED

ITEM FOUR - SCHEDULE OF HIRED OR BORROWED AUTO COVERAGE AND PREMIUMS

LIABILITY COVERAGE

RATING BASIS IS COST OF HIRE. Cost of hire means the total amount you incur for the hire of "autos" you don't own (not including "autos" you borrow or rent from your partners or "employees" or their family members). Cost of hire does not include charges for services performed by motor carriers of property or passengers.

State	Estimated Cost of Hire	Rate Per Each \$100 Cost of Hire	Advance Premium
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TOTAL ADVANCE PREMIUM:

ITEM FIVE - SCHEDULE FOR NON-OWNERSHIP LIABILITY

Named Insured's Business	Rating Basis	Number	Advance Premium
Other than a Social Service Agency	Number of Employees Number of Partners		
Social Service Agency	Number of Employees Number of Volunteers		

TOTAL ADVANCE PREMIUM:

**SCHEDULE OF COVERED AUTOS YOU OWN
(ITEM THREE OF THE DECLARATIONS) (Continued)**

POLICY NUMBER: 83 UEC PD6990

Absence, if any, of a limit entry below means that the limit entry shown in the corresponding ITEM TWO of the Declarations Limit Column applies instead.

NO. 00013 10 CHEV SED ID NO. 2G1WB5EKXA1187161
 GARAGED: DEKALB IL TERR: 134 CLASS: 73980
 ORIG. COST NEW: \$ 25,055 USE: PPT
 TAX LOC: 1447 ZIP CODE: 60115

06081
*2100083PD69900101

COVERAGES:	SEQ. NO. 00042	PREMIUMS
LIABILITY		\$ 478.00
AUTO MEDICAL PAYMENTS	\$10,000 EACH "INSURED"	\$ 25.00
UNINSURED MOTORISTS		\$ 40.00
UNDERINSURED MOTORISTS		\$ 60.00
COMPREHENSIVE \$ 1,000 DEDUCTIBLE		\$ 86.00
COLLISION \$ 1,000 DEDUCTIBLE		\$ 268.00



POLICY NUMBER: 83 UEC PD6990



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF LIMITS UNINSURED MOTORISTS COVERAGE AND UNDERINSURED MOTORISTS COVERAGE

This endorsement modifies insurance provided under the following:

- BUSINESS AUTO COVERAGE FORM
- GARAGE COVERAGE FORM
- TRUCKERS COVERAGE FORM

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement effective	
Named Insured	Countersigned by

(Authorized Representative)

The Limit shown in ITEM TWO of the Declarations for Uninsured Motorists Coverage and for Underinsured Motorists Coverage (when not included in Uninsured Motorists Coverage) is replaced by the limits shown below for the state indicated.

SCHEDULE

COVERAGE	LIMIT	STATE
UNINSURED MOTORISTS	\$ 1,000,000 each "accident"	IL
	\$,000 each "accident"	
	\$,000 each "accident"	
	\$,000 each "accident"	
	\$,000 each "accident"	
	\$,000 each "accident"	
UNDERINSURED MOTORISTS (when not included in Uninsured Motorists Coverage)	\$ 1,000,000 each "accident"	IL
	\$,000 each "accident"	
	\$,000 each "accident"	
	\$,000 each "accident"	
	\$,000 each "accident"	
	\$,000 each "accident"	

The state limit shown above completes the limit entry required on the endorsement(s) applicable in the same state.

AUTOMOBILE SUMMARY

PAGE 1

POLICY INFORMATION

NAMED INSURED: NORTHERN ILLINOIS UNIVERSITY
 PRODUCER CODE AND NAME: 552137 MARSH USA INC
 COMPANY CODE AND NAME: 6 HARTFORD UNDERWRITERS INSURANCE COMPANY
 EFFECTIVE DATE: 07/01/11 EXPIRATION DATE: 07/01/12
 EXAMINATION PERIOD:

POLICY COVERAGES RECAP

COVERAGE	COVERED	AUTOS	LIMITS	PREMIUM
LIABILITY	7		\$ 1,000,000 PER ACC	\$ 6,214.00
MED PAY	7		\$ 10,000 EACH INSURED	\$ 300.00
UM	7		\$ 1,000,000 PER ACC	\$ 520.00
UDM	7		\$ 1,000,000 PER ACC	\$ 780.00
OTC	7			\$ 979.00
COLLISION	7			\$ 2,909.00
			TOTAL PREMIUM	\$ 11,702.00

06082

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POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
 PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

AUTOMOBILE DETAIL

PAGE 1

POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11
PRIMARY STATE/TERRITORY: IL 134 OP CODE: 07398
MARKET SEGMENTATION: 984

STATE RATING MODIFICATION FACTORS AND COMMISSIONS

NORMAL LINE COMMISSION: 15.0

EXPERIENCE MOD: OTC .950 COLL .950

COMMERCIAL

AUTO NO: 00001 DESC: 05 CHEV VIN: 1G1ND52F65M247086
SEQ NO: 00002 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: SED
COST NEW: \$ 25,000 AGE: 07 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM (A)20 + (EZ)20.00 = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.12 X (FI).85) - ((IQ)114 X (FI).85 X (FA).18) = (A)91.08 X (ED).95 X (H).950 X (GV).75 = 62.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.075 X (FI).65) - ((IQ)367 X (FI).65 X (FA).12) = (A)228 X (ED).95 X (H).950 X (GV).75 = 154.00

AUTO NO: 00002 DESC: 07 CHRY VIN: 1A8HW58237F516485
SEQ NO: 00011 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: UTL
COST NEW: \$ 53,000 AGE: 05 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

KEYS

A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

AUTOMOBILE DETAIL (CONT)

PAGE 2

POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00002 DESC: 07 CHRY VIN: 1A8HW58237F516485

UM (A)20 + (EZ)20.00 = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.70 X (FI).95) - ((IQ)114 X (FI).95 X (FA).18) = (A)164.62 X (ED).95 X (H).950 X (GV).75 = 111.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.45 X (FI).85) - ((IQ)367 X (FI).85 X (FA).12) = (A)415 X (ED).95 X (H).950 X (GV).75 = 281.00

AUTO NO: 00003 DESC: 09 TOYOT VIN: JTDKB20U197839743
SEQ NO: 00020 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: HCHBK
COST NEW: \$ 22,000 AGE: 03 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM (A)20 + (EZ)20.00 = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.12 X (FI)1.00) - ((IQ)114 X (FI)1.00 X (FA).18) = (A)107.16 X (ED).95 X (H).950 X (GV).75 = 73.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.075 X (FI)1.00) - ((IQ)367 X (FI)1.00 X (FA).12) = (A)350 X (ED).95 X (H).950 X (GV).75 = 237.00

KEYS

A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

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AUTOMOBILE DETAIL (CONT)

PAGE 3

POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00004 DESC: 07 CHRY VIN: 3A8FY58B37T528823
SEQ NO: 00021 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: UTL
COST NEW: \$ 16,830 AGE: 05 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.00 X (FI).95) - ((IQ)114 X (FI).95 X (FA).18) = (A)88.81 X (ED).95 X (H).950 X (GV).75 = 60.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.00 X (FI).85) - ((IQ)367 X (FI).85 X (FA).12) = (A)275 X (ED).95 X (H).950 X (GV).75 = 186.00

AUTO NO: 00005 DESC: 10 HONDA VIN: 5FNYP4H51AB010449
SEQ NO: 00024 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: UTL
COST NEW: \$ 27,800 AGE: 02 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

KEYS

A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

AUTOMOBILE DETAIL (CONT)

PAGE 4

POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00005 DESC: 10 HONDA VIN: 5FNYF4H51AB010449

COMP DED: \$ 1,000
((IQ)114 X (FH)1.30 X (FI)1.00) - ((IQ)114 X (FI)1.00 X (FA).18) = (A)127.68 X (ED).95 X (H).950 X (GV).75 = 86.00

COLL DED: \$ 1,000
((IQ)367 X (FH)1.20 X (FI)1.00) - ((IQ)367 X (FI)1.00 X (FA).12) = (A)396 X (ED).95 X (H).950 X (GV).75 = 268.00

AUTO NO: 00006 DESC: 10 FORD VIN: 1FMCU0D70AKA32960
SEQ NO: 00031 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: UTL
COST NEW: \$ 23,540 AGE: 02 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000
((IQ)114 X (FH)1.12 X (FI)1.00) - ((IQ)114 X (FI)1.00 X (FA).18) = (A)107.16 X (ED).95 X (H).950 X (GV).75 = 73.00

COLL DED: \$ 1,000
((IQ)367 X (FH)1.075 X (FI)1.00) - ((IQ)367 X (FI)1.00 X (FA).12) = (A)350 X (ED).95 X (H).950 X (GV).75 = 237.00

AUTO NO: 00007 DESC: 07 FORD VIN: 3FAHP07ZX7R173849
SEQ NO: 00032 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: NO ENTRY MADE
COST NEW: \$ 18,100 AGE: 05 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

KEYS
A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

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AUTOMOBILE DETAIL (CONT)

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POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00007 DESC: 07 FORD VIN: 3FAHP07ZX7R173849

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.00 X (FI).95) - ((IQ)114 X (FI).95 X (FA).18) = (A)88.81 X (ED).95 X (H).950 X (GV).75 = 60.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.00 X (FI).85) - ((IQ)367 X (FI).85 X (FA).12) = (A)275 X (ED).95 X (H).950 X (GV).75 = 186.00

AUTO NO: 00008 DESC: 06 CHEV VIN: 2G1WT58K269291256
SEQ NO: 00036 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: 4 DR SEDAN
COST NEW: \$ 21,860 AGE: 06 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.12 X (FI).85) - ((IQ)114 X (FI).85 X (FA).18) = (A)91.08 X (ED).95 X (H).950 X (GV).75 = 62.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.075 X (FI).65) - ((IQ)367 X (FI).65 X (FA).12) = (A)228 X (ED).95 X (H).950 X (GV).75 = 154.00

KEYS

A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

AUTOMOBILE DETAIL (CONT)

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POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00009 DESC: 11 HONDA VIN: 5FNYF4H57BB05557
SEQ NO: 00037 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: 4 DR SEDAN
COST NEW: \$ 29,645 AGE: 01 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 500 ((IQ)114 X (FH)1.30 X (FI)1.00) - ((IQ)114 X (FI)1.00 X (FA).00) = (A)148.2 X (ED).95 X (H).950 X (GV).75 = 100.00

COLL DED: \$ 500 ((IQ)367 X (FH)1.20 X (FI)1.00) - ((IQ)367 X (FI)1.00 X (FA).00) = (A)440 X (ED).95 X (H).950 X (GV).75 = 298.00

AUTO NO: 00010 DESC: 07 CHRY VIN: 3A8FY58B37T528823
SEQ NO: 00039 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: UTL
COST NEW: \$ 20,000 AGE: 05 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: YES, NOT OWNER OR PRINCIPLE

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.00 X (FI).95) - ((IQ)114 X (FI).95 X (FA).18) = (A)88.81 X (ED).95 X (H).950 X (GV).75 = 60.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.00 X (FI).85) - ((IQ)367 X (FI).85 X (FA).12) = (A)275 X (ED).95 X (H).950 X (GV).75 = 186.00

KEYS
A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

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AUTOMOBILE DETAIL (CONT)

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POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00011 DESC: 08 NISSAN VIN: 1N4AL21E98N557950
SEQ NO: 00040 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: SED
COST NEW: \$ 18,230 AGE: 04 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM (A)20 + (EZ)20.00 = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000 ((IQ)114 X (FH)1.00 X (FI).95) - ((IQ)114 X (FI).95 X (FA).18) = (A)88.81 X (ED).95 X (H).950 X (GV).75 = 60.00

COLL DED: \$ 1,000 ((IQ)367 X (FH)1.00 X (FI).85) - ((IQ)367 X (FI).85 X (FA).12) = (A)275 X (ED).95 X (H).950 X (GV).75 = 186.00

AUTO NO: 00012 DESC: 10 CHEV VIN: 2G1WB5EK7A1161004
SEQ NO: 00041 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: SED
COST NEW: \$ 25,055 AGE: 02 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM (A)20 + (EZ)20.00 = 40.00

UDM (A)60.00 = 60.00

KEYS

A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

AUTOMOBILE DETAIL (CONT)

PAGE 8

POLICY NUMBER: 83 UEC PD6990 SA EFFECTIVE DATE: 07/01/11

AUTO NO: 00012 DESC: 10 CHEV VIN: 2G1WB5EK7A1161004

COMP DED: \$ 1,000
((IQ)114 X (FH)1.30 X (FI)1.00) - ((IQ)114 X (FI)1.00 X (FA).18) = (A)127.68 X (ED).95 X (H).950 X (GV).75 = 86.00

COLL DED: \$ 1,000
((IQ)367 X (FH)1.20 X (FI)1.00) - ((IQ)367 X (FI)1.00 X (FA).12) = (A)396 X (ED).95 X (H).950 X (GV).75 = 268.00

AUTO NO: 00013 DESC: 10 CHEV VIN: 2G1WB5EKXA1187161
SEQ NO: 00042 STATE: 12 TYPE: PPT
CLASS: 73980 ZIP: 60115 0000 TERR: 134
VEHICLE INDIVIDUALLY OWNED: NO MODEL: SED
COST NEW: \$ 25,055 AGE: 02 TAX LOC: 1447
OPERATOR LICENSE LESS THAN 5 YRS: NO

LIAB (A)422 X (ED).95 X (D)1.59 X (GV).75 = 478.00

MED PAY LMT: \$10,000 (A)35 X (ED).95 X (GV).75 = 25.00

UM ((A)20 + (EZ)20.00) = 40.00

UDM (A)60.00 = 60.00

COMP DED: \$ 1,000
((IQ)114 X (FH)1.30 X (FI)1.00) - ((IQ)114 X (FI)1.00 X (FA).18) = (A)127.68 X (ED).95 X (H).950 X (GV).75 = 86.00

COLL DED: \$ 1,000
((IQ)367 X (FH)1.20 X (FI)1.00) - ((IQ)367 X (FI)1.00 X (FA).12) = (A)396 X (ED).95 X (H).950 X (GV).75 = 268.00

GRAND TOTAL \$ 11,702.00

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KEYS

A = BASE RATE D = INCR LIMIT FCTR H = EXP MOD
ED = PPT USE FCTR EZ = UM INCR LMT RATE FA = DEDUCT FCTR
FH = ORIGINAL COST NEW FI = ACV AGE GROUP FCTR GV = COMPANY CODE DEV
IQ = PD BASE COV RATE

POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

PREMIUMS BY STATE RECAP

PAGE 1

POLICY INFORMATION

NAMED INSURED: NORTHERN ILLINOIS UNIVERSITY
PRODUCER CODE AND NAME: 552137 MARSH USA INC
EFFECTIVE DATE: 07/01/11

ST	PROP	B&M	MARINE	GEN-LIAB	AUTO-LIAB	PHYS-DAM	BOND	BURG
12					\$7,814	\$3,888		

06087

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POLICY # 83UECPD6990 SA CONTROL # 001 TERM ID R0FCV21A
PROCESS DATE 07/19/11 OPER INITIALS BJM AAR PREV POL # 83UECPD6990

PRODUCER'S FACT SHEET

NAMED INSURED: NORTHERN ILLINOIS UNIVERSITY

POLICY NO: 83 UEC PD6990 SA

PRODUCER'S NAME: MARSH USA INC
PRODUCER'S CODE: 552137

POLICY PERIOD: FROM 07/01/11 TO 07/01/12

TRANSACTION TYPE: RENEWAL

TOTAL ANNUAL PREMIUM** \$11,702.00
**INCLUDES TERRORISM PREMIUM \$0

COMMISSION BREAKDOWN

LOB	TOTAL ANNUAL PREMIUM	COMMISSION PERCENTAGE
AUTO	\$11,702.00	15.0
TOTAL:	\$11,702.00	

FORM	TITLE
HM00010295	POLICY FRONT COVER
HM00100107	COMMON POLICY DECLARATIONS -UEC
IL00171198	COMMON POLICY CONDITIONS
IH99400409	U.S. DEPT OF THE TREASURY, OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS
IH99410409	TRADE OR ECONOMIC SANCTIONS ENDORSEMENT
IL00210908	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM)
HA00040302	QUICK-REFERENCE - COMMERCIAL AUTO COVERAGE PART
HA00250204	COMMERCIAL AUTO COVERAGE PART DECLARATIONS
HA00121102T	BUSINESS AUTO COVERAGE FORM
CA00011001	SCHEDULE OF COVERED AUTOS YOU OWN
HA21020692	BUSINESS AUTO COVERAGE FORM
CA99030306	SCHEDULE OF LIMITS UNINSURED MOTORISTS COVERAGE AND UNDERINSURED MOTORISTS COVERAGE
CA21301108	AUTO MEDICAL PAYMENTS COVERAGE
CA21381108	ILLINOIS UNINSURED MOTORISTS COVERAGE
CA01200603	ILLINOIS UNDERINSURED MOTORISTS COVERAGE
CA02700894	ILLINOIS CHANGES
HA00241290	ILLINOIS CHANGES - CANCELLATION AND NONRENEWAL
HA99081290	CHANGES IN HIRED CAR PHYSICAL DAMAGE - LIMIT OF INSURANCE
HA99160910	POLLUTION LIABILITY COVERAGE - PRIVATE PASSENGER TYPE AUTOS
HA99260406	COMMERCIAL AUTOMOBILE BROAD FORM ENDORSEMENT WAR EXCLUSION

PRODUCER'S FACT SHEET (CONTINUED)

POLICY NO: 83UECPD6990

STUFFER/NOTICE	TITLE
G-3177-1	IMPORTANT INFORMATION FOR ILLINOIS POLICYHOLDERS
G-3418-0	PRODUCER COMPENSATION NOTICE
CAF-4255-0	(013) ILLINOIS INSURANCE CARD

06088

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