

HRH
Five Star Appraisal Program

550 West Van Buren Suite 1500 * Chicago, IL 60607
Toll Free: (800) 497-4644 * Dir: (312) 879-7145 * fax: (866) 720-5003

PROOF OF COVERAGE
Valid for 15 days

1. Name and Address of Insured: (a member of the Five Star Realty Inc., Risk Purchasing Group)

Joseph A Franko
Franko & Associates
201 4th St. Ste #101B
Oakland, CA, 94607

2. Insurer: **Underwriters at Lloyd's**
Rating: AM Best: A (Excellent) S&P: A (Positive)
3. Coverage: Errors and Omissions
4. Master Policy Number: **MPREA-1007**
5. Certificate Number: **To Be Assigned at time of Certificate Issuance**
6. Limits of Liability: **\$1,000,000** Each Claim, including Claims Expenses
\$1,000,000 Annual Aggregate, including Claims Expenses
7. Deductible: **2500** Each Claim, including Claims Expenses
8. Annual Policy Premium: **\$2,189.84** (Paid in Full, including any fees and taxes)
9. Policy Period: **12/4/2007 to 12/4/2008**
12:01 a.m. standard time at the location stated above.
10. Retroactive Date: **12/4/2003**

Definition: Retroactive Date (Prior Acts Coverage) - This is the date from which the Insured warrants that "CONTINUOUS" Professional Liability coverage has existed without interruption. Appraisers obtaining this insurance for the FIRST time or renewing insurance after a lapse in coverage will have a retroactive date the same as the policy inception date. A retroactive date indicates how far back in time this insurance will provide coverage for prior acts. Any claim made for an appraisal done prior to the retroactive date will be excluded under this policy.

11. Appraisers covered: **Joseph A. Franko**
Mary Chin
Daniel Haremski
12. Coverage is subject in all respects to the terms, conditions, & limitations of the master policy issued by Underwriters at Lloyd's, Policy Number MPREA-1007, unless otherwise specified.
13. This "Proof of Coverage" notice is your formal "Certificate", and is valid for 15 days and is to be used (or copies thereof) to notify banks, and other third parties that such coverage exists. During this 15 day period, you will be provided the coverage specified in the Certificate of Insurance and Master Policy. This document will be replaced by your Certificate of Insurance and your copy of the Master Policy.

Date of issuance: 11/13/2007

Valid for 15 days from: 12/4/2007

Kevin M. Ottley

Authorized Representative