POLICYHOLDER DISCLOSURE NOTICE

ML-19–Policy Endorsement

Your current policy includes an important coverage change. Please review this important notice and retain it with ***your*** insurance policy.

This disclosure notice is not a contract of insurance. It is intended to provide information on form ML-19 which is now a part of ***your*** policy. It is recommended that ***you*** review ***your*** policy carefully to determine ***your*** duties, rights and obligations. This information is intended to assist ***you*** in the review of ***your*** prior and current policy. If there are conflicts between this Disclosure Notice and ***your*** policy, the provisions of the policy shall prevail.

The addition of form ML-19 results in the exclusion of loss for intentional acts and criminal activity, which restricts the coverage under ***your*** policy. The complete ML-19 is included with ***your*** policy for ***your*** review.