CONTROLLED SUBSTANCE EXCLUSION
For Use with 1/88, 3/93 and 9/02 General Liability Coverage Forms

This endorsement is subject to the ***terms*** contained in ***your*** policy.

WHAT *WE* DO NOT PAY FOR

The following exclusion is added to ***your*** policy.

1. ***We*** do not pay for ***bodily injury***, ***property damage***, and when applicable to ***your*** policy, ***personal injury*** or ***advertising injury***, arising out of the use, sale, manufacture, delivery, transfer or possession by any person of a controlled substance established by 21 U.S.C.A. Sections 811 and 812. This exclusion applies even if the claims against an ***insured*** allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of other persons by an ***insured***.
   However, this exclusion does not apply to the legitimate use of prescription drugs by a person following the lawful orders of any health care professional.

All other ***terms*** and conditions remain unchanged.

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