EXCLUSION OF FARM EMPLOYEES ILLEGALLY EMPLOYED

Refer to Supplemental Declarations if information is not shown on this form.
The coverage under this endorsement is subject to the ***terms*** contained in the General Policy Provisions~~.~~

~~.....1. Coverage L Personal~~ and the appropriate Liability Coverage.

WHAT *WE* DO NOT PAY FOR:

1. Coverage L and Coverage M~~ Medical Payments To Others~~ do not apply to ***bodily injury*** to a ***farm employee*** knowingly employed by an ***insured*** in violation of the law~~ with the knowledge or approval of an ***insured***~~.
2. ~~Coverage M Medical Payments To Others does not apply to punitive or exemplary damages for ***bodily injury*** to a ***farm employee*** employed in violation of law.~~

We do not pay punitive or exemplary damages or any damages other than compensatory damages and related costs.

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