

# THE CINCINNATI INSURANCE COMPANY

P.O. BOX 145496, CINCINNATI, OHIO 45250-5496  
(513) 870-2000

5049191

A Stock Insurance Company

Previous Policy No.

## COMMON POLICY DECLARATIONS

RENEWAL

DECLARATIONS	POLICY NUMBER	CPP 533 41 70 AWR
<b>NAMED INSURED</b> OHIO REGION OF NARCOTICS ANONYMOUS PO BOX 546		
<b>ADDRESS</b> COLUMBUS OH 43216-0546 (Number & Street, Town, County, State & Zip No.)		
<b>Policy Period:</b> At 12:01 A.M., STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE		
<b>All coverages except Automobile and / or Garage</b> Policy number: CPP 533 41 70 AWR FROM: 10-15-2007 TO: 10-15-2010		
<b>Automobile and / or Garage</b> Policy number: FROM: TO:		
Agency		34-140
City <b>EOFF INSURANCE AGENCY, INC.</b>		
<b>Legal Entity / Business Description</b> CORPORATION		
IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.		
FORMS APPLICABLE TO ALL COVERAGE PARTS: (show numbers)		
IA102A	02/03	IA41210H 11/05 IA4236 01/06 IA4238 01/06
IP4070H	03/92	IP446 08/01 GA501 10/01

BE1 00  
08-06-2007

Countersigned

08/13/2007

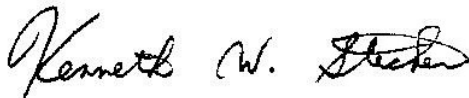
(Date)

By

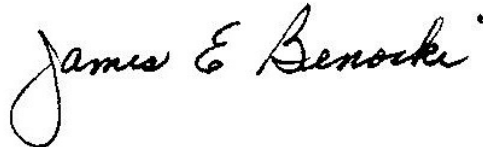


(Authorized Representative)

IN WITNESS WHEREOF, this policy has been signed by our President and Secretary in the City of Fairfield, Ohio, but this policy shall not be binding upon us unless countersigned by an authorized representative of ours. This provision does not apply in Arizona, Virginia and Wisconsin.



Secretary



President

ORIGINAL