



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED JPMorgan Chase & Co.	
POLICY NUMBER See Certificate Number: 570075383080			
CARRIER See Certificate Number: 570075383080	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER	
INSURER	
INSURER	
INSURER	

ADDITIONAL POLICIES If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
	WORKERS COMPENSATION						
C		N/A		WC 014590603 CA	06/01/2018	06/01/2019	
B		N/A		WC014590602 AZ IL NJ NY TX	06/01/2018	06/01/2019	
D		N/A		WC014590604 FL	06/01/2018	06/01/2019	
B		N/A		WC014590605 MA ND OH WA WI WY	06/01/2018	06/01/2019	
B		N/A		WC014590600 MN	06/01/2018	06/01/2019	