



Georgia Amendatory Endorsement

Insured _____

Endorsement No. _____

Policy No. _____

Effective Date of this
Endorsement _____


This policy is changed to provide:

A. Condition L - Your Bankruptcy or Insolvency - is changed to include the following:

In the event of the Bankruptcy or Insolvency of the Named Insured:

If the Georgia Self-Insurers Guaranty Trust Fund is called upon to expend monies on behalf of the insolvent or bankrupt member insured under this policy in order to pay workers' compensation benefits, medical expenses or other costs pursuant to O.C.G.A. 34-9-1, et seq., we will reimburse the Georgia Self-Insurers Guaranty Trust Fund for those amounts according to the terms of the policy. This provision is subject to the policy terms, retention(s) and limit(s). The Georgia Self-Insurers Guaranty Trust Fund will be treated as the insured for purposes of reimbursement pursuant to this endorsement and payments made by the bankrupt insolvent named insured will be credited towards the retention for the benefit of the Georgia Self-Insurers Guaranty Trust Fund.

In the event of cancellation, we will notify the Georgia Self-Insurers Guaranty Trust Fund as follows:

Countersigned: 
Authorized Signature