

and expires concurrently with said Policy.

## AGREEMENT TO PROVIDE NOTICE OF CANCELLATION TO SPECIFIED PERSON AND/OR ENTITY ENDORSEMENT - TENNESSEE (If Policy is Cancelled Before Expiration)

It is agreed that if the policy to which this endorsem endeavor to mail notice to the person or entity named be		ed is cand	elled before	the expiration	date,	we	will
Person or Entity Name and Address:							
All other terms and conditions of the Policy remain unch	anged.						
This endorsement, which forms a part of and is for at	tachment to the	ne Policy	issued by the	e designated li	nsurers	s, ta	kes

effect on the effective date of said Policy at the hour stated in said Policy, unless another effective date is shown below,

CNA101501TN (10-23)
Page 1
Endorsement No:
Effective Date:

Insured Name: