

**WISCONSIN EMPLOYEE LEASING COMPANY ENDORSEMENT – MULTIPLE COORDINATED POLICY (MCP)**

This endorsement applies only to the insurance provided by the policy because Wisconsin is shown in Item 3.A. of the Information Page.

This policy applies only with respect to employees provided to the client by the employee leasing company shown below under an employee leasing company or professional employer arrangement.

Certain words and phrases in this endorsement are defined as follows:

**Employee Leasing Company** for the purpose of the administration of Chapter 102 of the Wisconsin Statutes means an entity who contracts to provide the nontemporary, ongoing employee workforce of a client under a written contract, regardless of whether the entity uses the term professional employee organization, PEO, staff leasing company, registered staff, leasing company, employee leasing company or any other name.

**Client** means an entity that obtains all or part of its workforce through a contract with an employee leasing company.

The insurance afforded by this policy is not intended to satisfy the employee leasing company's duty to secure its obligations under the workers compensation law for its direct-hire (non-leased) employees. We will not file evidence of this insurance on behalf of the employee leasing company with any government agency with respect to its direct-hire employees.

Premium will be charged for covered employees provided by the employee leasing company. The employee leasing company must obtain from the client and furnish to us a complete payroll record of the covered employees to satisfy obligations under Part Five (Premium), C.2. Payroll for all of the covered employees employed during the policy period will be assigned to the policy.

If the policy is canceled or nonrenewed by us, we will send at least 30 days written notice of such cancellation or at least 60 days written notice of nonrenewal to both the employee leasing company and client(s).

Voluntary mid-term cancellation of the policy must be agreed upon by the client(s) and the employee leasing company, and must be confirmed either by the employee leasing company promptly giving written confirmation to the client(s) or by written agreement by the client.

If, during the policy period, an employee leasing company terminates an employee leasing agreement with a client in its entirety and the employee leasing company is shown as the First Named Insured in Item 1 of the Information Page, we may cancel the policy by providing at least 30 days written notice to the employee leasing company and to each client.

If, during the policy period, an employee leasing company terminates an employee leasing agreement with a client in its entirety and the client is shown as the First Named Insured in Item 1 of the Information Page, we may cancel the employee leasing company's coverage under the policy by endorsement. The policy shall continue in force as to all employees of the client.

Part Four (Your Duties If Injury Occurs) applies to the client and the employee leasing company. The employee leasing company and the client will recognize our right to defend under Parts One and Two and our right to inspect under Part Six (Conditions).

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

**(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)**

SCHEDULE

Employee Leasing Company	Address	FEIN
Endorsement Effective Date	Effective Policy No.	Endorsement No.
Insured		
Insurance Company		

**WC 48 03 15**

(Ed. 4-08)