



AGENCY CUSTOMER ID: 00001604

LOC #: \_\_\_\_\_



### ADDITIONAL REMARKS SCHEDULE

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AGENCY Ironwood, a Marsh & McLennan Agency, LLC Co		NAMED INSURED INFAX, INC.	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

**ADDITIONAL REMARKS**

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

CA Workers Compensation - POL# 6050155347  
The Continental Insurance Company  
Effective: 9/1/2023-9/1/2024  
Employers Liability: \$1M/\$1M/\$1M