

WESTERN SURETY COMPANY

One of America's Oldest Bonding Companies

CHICAGO • SIOUX FALLS • DALLAS
PALO ALTO • BALA-CYNWYD, PA.

NOTARY PUBLIC ERRORS AND OMISSIONS POLICY

FORM No. E & O- 0194493

WESTERN SURETY COMPANY will pay on behalf of Sue Duke
of Post Office Box 36130, Birmingham, Alabama 35236
(Address)

(hereinafter called the insured), all sums which the insured shall become obligated to pay by reason of liability for breach of duty while acting as a duly commissioned and sworn Notary Public, claim for which is made against the insured by reason of any negligent act, error or omission, committed or alleged to have been committed by the insured, arising out of the performance of notarial service for others in the insured's capacity as a duly commissioned and sworn Notary Public.

POLICY PERIOD: This policy applies only to negligent acts, errors or omissions which occur during the policy period and then only if claim, suit or other action arising therefrom is commenced during the policy period or within the applicable Statute of Limitations pertaining to the insured.

The Policy Period ends June 17, 1991.

LIMITS OF LIABILITY: The liability of this company shall not exceed in the aggregate for all claims under this insurance the amount of Two Thousand and 00/100 (\$ 2,000) DOLLARS.

(NOT VALID IF FILLED IN FOR MORE THAN \$10,000.00)

In addition to the limit of liability and in accordance with the other provisions of this policy, this company will pay costs and expenses paid and incurred in investigating, contesting or settling liability in an amount not to exceed one-half of the limit of this policy.

EXCLUSIONS: Coverage under this policy does not apply to any dishonest, fraudulent, criminal or malicious act or omission of the insured.

CO-INSURANCE: If the insured has other insurance against a loss covered by this policy, the company shall not be liable under this policy for a greater proportion of such loss than the limit of liability stated in this policy bears to the total limit of liability of all valid and collectible insurance against such loss.

Dated, signed and sealed this 17th day of June, 1987

COUNTERSIGNED:

By [Signature]
Resident Agent
Alabama Insurance Exchange, Inc.
Post Office Box 36878
Birmingham, Alabama 35236
Address Claims to:
WESTERN SURETY COMPANY
908 West Avenue N.
Sioux Falls, S. Dak. 57101

WESTERN SURETY COMPANY

By [Signature]
Assistant Secretary

STATE OF ALA. SHELLEY CO.
I CERTIFY THIS
INSTRUMENT WAS FILED

1987 JUN 22 PM 1:48

[Signature]
JUDGE OF PROBATE