

TEXAS DEPT. OF INSURANCE
 AUSTIN, TEXAS
 APPROVED
 DEC 29 2011

117592

GMAC Insurance

Homestate County Mutual Insurance Company
 500 West Fifth Street • P. O. Box 3199
 Winston-Salem, North Carolina 27102-3199

CERTIFICATE OF INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER.
 THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY BELOW.

Certificate Holder:

Insured:

Policy Number:
 Policy Eff. Date:
 Policy Exp. Date:

This is to certify that the policy of insurance shown above has been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policy described herein is subject to all the terms, exclusions and conditions of such policy. Limits shown may have been reduced by paid claims.

Type of Insurance	Limits of Liability	
Auto Liability: Scheduled Autos	Bodily Injury \$ 30,000 each person \$60,000 each occurrence	
Auto Physical Damage: Scheduled Autos	Property Damage	
<input type="checkbox"/> Collision	None	Lesser of ACV or Stated Amount Subject to \$0.00 Deduction From Each Loss
<input type="checkbox"/> Comp	None	Lesser of ACV or Stated Amount Subject to \$0.00 Deduction From Each Loss
<input type="checkbox"/> Specified Perils	None	Lesser of ACV or Stated Amount Subject to \$0.00 Deduction From Each Loss
Other: Other 1	Other 2	Other 3

Agent:

Cancellation
 Should the above described policy be cancelled before the expiration date thereof, we will mail written notice of cancellation that complies with state statutes to the certificate holder named above.

Authorized Representative:

Issue Date: