## CHARTIS AEROSPACE INSURANCE SERVICES, INC. CERTIFICATE OF INSURANCE - TEXAS

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THIS IS TO	CERTIFY TO:	<del>-</del>		THE PARTY OF THE P				
THAT THE F	FOLLOWING POLICY/IES OF INSUR	IANCE I	HAS/HAVE BEEI	N ISSUED TO:				
	COMPANY			· · · · · · · · · · · · · · · · · · ·				
	ly applies as indicated by a specific	: limit a	nd deductible.					
	ILITY COVERAGES		LIMITS OF LIABILITY					
Coverage A:	Liability Coverage for Scheduled A	Aircraft	\$_		Ea	ach Occurrence		
Coverage X:	Medical Expenses with respect to Each Non-Crew Member Passenge Each Crew Member:	heduled Aircraft \$_ \$_		Ea	ach Occurrence			
Coverage N:	ge N: Physical Damage Coverage for Scheduled Aircraft				Dedu	Peductibles		
FAA Cert. Number	Make & Model	Year Built	Seats Crew / <b>Pass</b>	Insured Value	Not In- Motion	In-Motion/ Ingestion		
			\$		\$	\$		
	TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS A P.P.R.O.V.E.D.							
OTHER COVE	RAGES/CONDITIONS/REMARKS		APR - 2 2012					
holder. A cer	of insurance is issued as a matte tificate of insurance does not amen ns afforded by the policies referenc	nd, exte	end, or alter the	and confers n coverage, terr	o rights upon ns, exclusions	the certificate , conditions, or		
If the policy recertificate hold thereto.	eferenced above is cancelled before der if such notice of cancellation h	the explain the thick the	piration date, no n included withi	otice of cancell n this policy a	ation shall be nd/or endorse	provided to the ments attached		
Certificate No.								
Date of Issue			Ву	Ву				
LD30-TX (02/12) (Authorized Representative)								