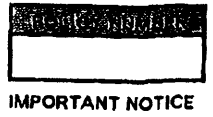


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TEXAS FARM BUREAU INSURANCE COMPANIES

TEXAS FARM BUREAU CASUALTY INSURANCE COMPANY FARM BUREAU COUNTY MUTUAL INSURANCE COMPANY OF TEXAS
TEXAS FARM BUREAU MUTUAL INSURANCE COMPANY SOUTHERN FARM BUREAU LIFE INSURANCE COMPANY
TEXAS FARM BUREAU UNDERWRITERS



Date:

7420 FISH POND RD • WACO TX 76710-1010 • (254) 772-3030 • MAILING ADDRESS: PO BOX 2689 • WACO TX 76702-2689

CERTIFICATE OF INSURANCE

FOR INFORMATION PURPOSES ONLY

CERTIFICATE HOLDER NAME AND MAILING ADDRESS POLICY PERIOD FROM TO

TEXAS DEPARTMENT OF INSURANCE
AUSTIN, TEXAS
APPROVED
AUG 14 2012

This is to certify that the policy (Including endorsements) of insurance, as described below, has been issued by the undersigned, to the Insured named below and is in force at this time. If cancelled at the request of either party, or changed in any manner for any reason during the period of coverage, as stated herein, so as to affect this Certificate, days prior written notice will be given by this Insurance company to the Certificate Holder named above.

The of Waco, Texas hereby certifies that the following described policy has been issued and is in force and effect.

INSURED NAME AND MAILING ADDRESS

DESCRIPTION OF RISK

COVERAGE	LIMITS OF LIABILITY	
PUBLIC LIABILITY	BODILY INJURY/PROPERTY DAMAGE	
<input type="checkbox"/> Commercial General Liability	\$	EACH OCCURRENCE
<input type="checkbox"/> Premises and Operations	\$	AGGREGATE
<input type="checkbox"/> Contractors Protective		
<input type="checkbox"/> Products - Completed Operations		
<input type="checkbox"/> Contractual - Designated Contracts Only		
<input type="checkbox"/> Excludes Explosion, Collapse and Underground Property Damage Hazard		
AUTOMOBILE LIABILITY		
<input type="checkbox"/> Fleet	\$	
<input type="checkbox"/> Specific Automobiles Only	\$	
<input type="checkbox"/> Non-Ownership and Hired Automobiles	\$	
FARM LIABILITY	\$	EACH OCCURRENCE
	\$	AGGREGATE
PERSONAL LIABILITY		
<input type="checkbox"/> Homeowners	\$	EACH OCCURRENCE
<input type="checkbox"/> Farm and Ranch Owners	\$	EACH OCCURRENCE
UMBRELLA LIABILITY	\$	EACH OCCURRENCE
	\$	AGGREGATE

This Certificate of Insurance neither affirmatively nor negatively amends, extends, or alters the coverage or any provision afforded by the policy. This Certificate is executed and issued in duplicate by the aforesaid Company.

5-08-172811 (FDCCOI - PDCCOI)