acord INSURANCE BINDER

ISSUE DATE (MM/DD/YY) 6/30/08

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

PRODUCER

CHANDLER INSURANCE MANAGERS, INC.
P.O. BOX 9
CHANDLER, OK 74834

CODE SUB-CODE

COMPANY: NATIONAL AMERICAN INS. CO.

BINDER NO.: PP00010035

EFFECTIVE DATE	EFFECTIVE TIME			EXPIRATION DATE	EXPIRATION TIME		
7/1/08	12:01	X	AM	7/1/09		X	12:01 AM
			PM				NOON

[ ] THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY NO.:

DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (INCLUDING LOCATION)

CONSERVATION DISTRICT

INSURED

OKLAHOMA CONSERVATION DISTRICTS
c/o OKLAHOMA CONSERVATION COMMISSION
2800 NORTH LINCOLN, STE 160
OKLAHOMA CITY, OK 73105-4201

COVERAGES

ALL LIABILITY LIMITS IN THOUSANDS

TYPE OF INSURANCE	COVERAGES/FORMS	AMOUNT	DEDUCTIBLE	COINSURANCE
PROPERTY CAUSES OF LOSS [ ] BASIC [ ] BROAD [ ] SPECIAL				
GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCURRENCE [ ] OWNER'S & CONTRACTORS PROTECTIVE [X] PUBLIC OFFICIALS	GL INCLUDES $100,000 POLLUTION INCIDENTAL COVERAGE: PUBLIC OFFICIALS INCLUDES $1,000,000 AGGREGATE FOR EMPLOYMENT RELATED ACTS RETRO DATE FOR CLAIMS MADE:	GENERAL AGGREGATE	$ 2,000*	
		PRODUCTS-COMP/OPS AGGREGATE	$ INCL.	
		PERSONAL & ADVERTISING INJURY	$ 1,000*	
		EACH OCCURRENCE	$ 1,000*	
		FIRE DAMAGE (ANY ONE FIRE)	$ 100,000	
		MEDICAL EXPENSE (ANY ONE PERSON)	$ EXCLUDE	
AUTOMOBILE [ ] LIABILITY [X] NON/OWNED [X] HIRED [ ] GARAGE	[ ] ALL VEHICLES [ ] SCHEDULED VEHICLES	CSL	$1,000,000	
		BI PERS/ACCID	$	
		PD	$	
		MED. PAY	$	
		PIP	$	
		UM	$	
AUTO PHYSICAL DAMAGE [ ] COLLISION DED: [ ] OTC DED:	[ ] ALL VEHICLES [ ] SCHEDULED VEHICLES	[ ] ACV [ ] STATED AMOUNT [ ] OTHER	$	
EXCESS LIABILITY [ ] UMBRELLA FORM [ ] OTHER THAN UMBRELLA FORM	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE	AGGREGATE	SELF-INSURED RETENTION
WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY		STATUTORY		
		$	(EACH ACCIDENT)	
		$	(DISEASE-POLICY LIMIT)	
		$	(DISEASE-EACH EMPLOYEE)	

SPECIAL CONDITIONS/RESTRICTIONS/OTHER COVERAGES

ON CLAIMS SUBJECT TO THE GOVERNMENTAL TORT CLAIMS ACT, THE LIMITS ARE:
$125,000 PER PERSON BODILY INJURY
$ 25,000 PER PERSON PROPERTY DAMAGE
$1,000,000 TOTAL PER OCCURRENCE

NAME & ADDRESS

[ ] MORTGAGEE
[ ] LOSS PAYEE
[ ] ADDITIONAL INSURED

LOAN#

AUTHORIZED REPRESENTATIVE

Tina A. Christy

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