

TEXAS CERTIFICATE OF INSURANCE

This certificate is issued for informational purposes only. It certifies that the policies listed in this document have been issued to the Named Insured. It does not grant any rights to any party nor can it be used, in any way, to modify coverage provided by such policies. Alteration of this certificate does not change the terms, exclusions or conditions of such policies. Coverage is subject to the provisions of the policies, including any exclusions or conditions, regardless of the provisions of any other contract, such as between the certificate holder and the Named Insured. The limits shown below are the limits provided at the policy inception. Subsequent paid claims may reduce these limits.

Certificate Holder:	Named Insured:
----------------------------	-----------------------

Automobile Liability			
Insurer Name: Allstate County Mutual Insurance Company			
Policy Number:			
1 – Any Auto	2 – Owned Autos Only	3 – Owned Priv. Pass. Autos Only	
4 – Owned Autos Other Than Priv. Pass. Autos Only	5 – Owned Autos Subject to No Fault	6 – Owned Autos Subject to a Compulsory UM Law	
7 – Specifically Described Autos	8 – Hired Autos Only	9 – Nonowned Autos Only	
Policy Effective Date:		Policy Expiration Date:	
Limits of Insurance:	\$	Combined Single Limit (each accident)	
	\$ BI Per Person	\$ BI Per Accident	\$ PD Per Accident
Description of Operations/Locations/Vehicles/Endorsements/Special Provisions			
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS APPROVED DEC 29 2011</p> </div>			
Interested Party Type:			
<p>THIS CERTIFICATE DOES NOT GRANT ANY COVERAGE OR RIGHTS TO THE CERTIFICATE HOLDER.</p> <p>IF THIS CERTIFICATE INDICATES THAT THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, THE POLICY(IES) MUST EITHER BE ENDORSED OR CONTAIN SPECIFIC LANGUAGE PROVIDING THE CERTIFICATE HOLDER WITH ADDITIONAL INSURED STATUS. THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED ONLY TO THE EXTENT INDICATED IN SUCH POLICY LANGUAGE OR ENDORSEMENT.</p>			

Producer:	
Authorized Representative:	
Date:	