



P.O. BOX 2689
WACO, TX 76702

[Certificate Holder]
[Address]
[City, State ZIP]

[Date]

CERTIFICATE OF INSURANCE
FOR INFORMATION PURPOSES ONLY

This is to certify that the policy or policies (including endorsements) of insurance, as described below, have been issued by the undersigned, to the named insured below. In the event of cancellation prior to the expiration date, notice will be provided in accordance with the policy provisions.

Texas Farm Bureau Insurance Companies of Waco, Texas hereby certifies that the policy or policies described below are in force as of the date shown.

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.

Named Insured(s):
Mailing Address:

Policy Type: Personal Liability

Policy No.:

Policy Period:

Description of Risk:

Coverages:		Limits	
C.	Personal Liability	\$	each occurrence/general aggregate
	Canine Liability	\$	per policy period
D.	Medical Payments to Others	\$	each person